

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Allstate Insurance Company PAC

ADDRESS (number and street)

2775 Sanders Road Suite A2W

☐ Check if different than previously reported. (ACC)

Northbrook

IL

60062

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00040253

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

IL

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mario Rizzo

Signature of Treasurer

Mario Rizzo

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 10 / 16 / 2014 To: M M / D D / Y Y Y Y Y 11 / 24 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		18587.52
(b) Cash on Hand at Beginning of Reporting Period.....	16897.65	
(c) Total Receipts (from Line 19)	29079.15	236928.99
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	45976.80	255516.51
7. Total Disbursements (from Line 31)	19749.14	229288.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	26227.66	26227.66
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
10		16		2014

To:

M M	/	D D	/	Y Y Y Y
11		24		2014

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

28220.03

179978.16

(ii) Unitemized

859.12

55950.83

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

29079.15

235928.99

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

29079.15

235928.99

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

1000.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

29079.15

236928.99

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

29079.15

236928.99

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	119.14	1218.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	119.14	1218.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	130100.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	12630.00	97970.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	19749.14	229288.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19749.14	229288.85

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	29079.15	235928.99
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	29079.15	235928.99
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	119.14	1218.85
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	119.14	1218.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 282

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. REBECCA A ABEL

Mailing Address 657 CORAL COURT

City	State	Zip Code
LINDENHURST	IL	60046

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

514.43

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2014

Transaction ID : A2014-2378833

Amount of Each Receipt this Period

24.70

Full Name (Last, First, Middle Initial)

B. REBECCA A ABEL

Mailing Address 657 CORAL COURT

City	State	Zip Code
LINDENHURST	IL	60046

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2014

Transaction ID : A2014-2412232

Amount of Each Receipt this Period

24.70

Full Name (Last, First, Middle Initial)

C. REBECCA A ABEL

Mailing Address 657 CORAL COURT

City	State	Zip Code
LINDENHURST	IL	60046

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

563.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2014

Transaction ID : A2014-2673027

Amount of Each Receipt this Period

24.70

SUBTOTAL of Receipts This Page (optional)..... ►

74.10

TOTAL This Period (last page this line number only)..... ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ERNEST D ADAMS

Mailing Address P O Box 105

City
Grayslake

State Zip Code
IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Leader-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434.10

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378665

Amount of Each Receipt this Period

20.88

Full Name (Last, First, Middle Initial)

B. ERNEST D ADAMS

Mailing Address P O Box 105

City
Grayslake

State Zip Code
IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Leader-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.98

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412065

Amount of Each Receipt this Period

20.88

Full Name (Last, First, Middle Initial)

C. ERNEST D ADAMS

Mailing Address P O Box 105

City
Grayslake

State Zip Code
IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Leader-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.86

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672863

Amount of Each Receipt this Period

20.88

SUBTOTAL of Receipts This Page (optional)..... ▶

62.64

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL W AGAR

Mailing Address 200 W MILL VALLEY DR

City

COLLEYVILLE

State

TX

Zip Code

76034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Service Manager-Sr Te

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.79

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378770

Amount of Each Receipt this Period

16.68

Full Name (Last, First, Middle Initial)

B. MICHAEL W AGAR

Mailing Address 200 W MILL VALLEY DR

City

COLLEYVILLE

State

TX

Zip Code

76034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Service Manager-Sr Te

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.47

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412170

Amount of Each Receipt this Period

16.68

Full Name (Last, First, Middle Initial)

C. MICHAEL W AGAR

Mailing Address 200 W MILL VALLEY DR

City

COLLEYVILLE

State

TX

Zip Code

76034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Service Manager-Sr Te

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.15

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672966

Amount of Each Receipt this Period

16.68

SUBTOTAL of Receipts This Page (optional)..... ►

50.04

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DENIS BAILEY

Mailing Address 8316 E. Tailfeather Dr

City State Zip Code
 Scottsdale AZ 85255

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.16

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378600

Amount of Each Receipt this Period

23.26

Full Name (Last, First, Middle Initial)

B. DENIS BAILEY

Mailing Address 8316 E. Tailfeather Dr

City State Zip Code
 Scottsdale AZ 85255

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.42

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412001

Amount of Each Receipt this Period

23.26

Full Name (Last, First, Middle Initial)

C. DENIS BAILEY

Mailing Address 8316 E. Tailfeather Dr

City State Zip Code
 Scottsdale AZ 85255

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

532.68

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672800

Amount of Each Receipt this Period

23.26

SUBTOTAL of Receipts This Page (optional)..... ►

69.78

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 282

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ALEXANDRA BALATSOUKAS

Mailing Address 1225 W. Morse, Unit 508

City	State	Zip Code
Chicago	IL	60626

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

682.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	17	/	2014

Transaction ID : A2014-2378774

Amount of Each Receipt this Period

33.36

Full Name (Last, First, Middle Initial)

B. ALEXANDRA BALATSOUKAS

Mailing Address 1225 W. Morse, Unit 508

City	State	Zip Code
Chicago	IL	60626

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.36

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	31	/	2014

Transaction ID : A2014-2412174

Amount of Each Receipt this Period

33.36

Full Name (Last, First, Middle Initial)

C. ALEXANDRA BALATSOUKAS

Mailing Address 1225 W. Morse, Unit 508

City	State	Zip Code
Chicago	IL	60626

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.72

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	14	/	2014

Transaction ID : A2014-2672970

Amount of Each Receipt this Period

33.36

SUBTOTAL of Receipts This Page (optional)..... ►

100.08

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM P BALLINGER

Mailing Address 61 Tournament Dr N

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Chief Underwriter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

779.20

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378642

Amount of Each Receipt this Period

39.37

Full Name (Last, First, Middle Initial)

B. WILLIAM P BALLINGER

Mailing Address 61 Tournament Dr N

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Chief Underwriter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

818.57

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412043

Amount of Each Receipt this Period

39.37

Full Name (Last, First, Middle Initial)

C. WILLIAM P BALLINGER

Mailing Address 61 Tournament Dr N

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Chief Underwriter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

857.94

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672841

Amount of Each Receipt this Period

39.37

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

118.11

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PHILLIP W BANET

Mailing Address 4589 JADE LANE

City State Zip Code
HOFFMAN ESTATES IL 60192

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.88

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378669

Amount of Each Receipt this Period

42.21

Full Name (Last, First, Middle Initial)

B. PHILLIP W BANET

Mailing Address 4589 JADE LANE

City State Zip Code
HOFFMAN ESTATES IL 60192

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.09

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412069

Amount of Each Receipt this Period

42.21

Full Name (Last, First, Middle Initial)

C. PHILLIP W BANET

Mailing Address 4589 JADE LANE

City State Zip Code
HOFFMAN ESTATES IL 60192

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

965.30

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672867

Amount of Each Receipt this Period

42.21

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

126.63

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROBERT K BECKER

Mailing Address 5 Greensview Lane

City

Scotch Plains

State

NJ

Zip Code

07076

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

632.88

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378613

Amount of Each Receipt this Period

30.33

Full Name (Last, First, Middle Initial)

B. ROBERT K BECKER

Mailing Address 5 Greensview Lane

City

Scotch Plains

State

NJ

Zip Code

07076

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.21

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412014

Amount of Each Receipt this Period

30.33

Full Name (Last, First, Middle Initial)

C. ROBERT K BECKER

Mailing Address 5 Greensview Lane

City

Scotch Plains

State

NJ

Zip Code

07076

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

693.54

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672813

Amount of Each Receipt this Period

30.33

SUBTOTAL of Receipts This Page (optional)..... ►

90.99

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DIANE BELLAS

Mailing Address 1402 N. Illinois Avenue

City State Zip Code
 Arlington Heights IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.03

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378697

Amount of Each Receipt this Period

22.86

Full Name (Last, First, Middle Initial)

B. DIANE BELLAS

Mailing Address 1402 N. Illinois Avenue

City State Zip Code
 Arlington Heights IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.89

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412097

Amount of Each Receipt this Period

22.86

Full Name (Last, First, Middle Initial)

C. DIANE BELLAS

Mailing Address 1402 N. Illinois Avenue

City State Zip Code
 Arlington Heights IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.75

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672894

Amount of Each Receipt this Period

22.86

SUBTOTAL of Receipts This Page (optional)..... ►

68.58

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WALTER A BERKOWICZ

Mailing Address 405 GATESHEAD DRIVE

City
NAPERVILLE

State Zip Code
IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AFT-Architect-Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.85

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378737

Amount of Each Receipt this Period

37.14

Full Name (Last, First, Middle Initial)

B. WALTER A BERKOWICZ

Mailing Address 405 GATESHEAD DRIVE

City
NAPERVILLE

State Zip Code
IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AFT-Architect-Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

812.99

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412137

Amount of Each Receipt this Period

37.14

Full Name (Last, First, Middle Initial)

C. WALTER A BERKOWICZ

Mailing Address 405 GATESHEAD DRIVE

City
NAPERVILLE

State Zip Code
IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AFT-Architect-Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.13

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672933

Amount of Each Receipt this Period

37.14

SUBTOTAL of Receipts This Page (optional)..... ►

111.42

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. EDWARD A BIEMER

Mailing Address 807 Greenwood Ave.

City State Zip Code
GLENCOE IL 60022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Product Line Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

909.15

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378626

Amount of Each Receipt this Period

43.52

Full Name (Last, First, Middle Initial)

B. EDWARD A BIEMER

Mailing Address 807 Greenwood Ave.

City State Zip Code
GLENCOE IL 60022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Product Line Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

934.37

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412027

Amount of Each Receipt this Period

25.22

Full Name (Last, First, Middle Initial)

C. ROBERT W BIRMAN

Mailing Address 7533 WHITLOCK PLACE

City State Zip Code
LINCOLN NE 68516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.59

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378739

Amount of Each Receipt this Period

19.86

SUBTOTAL of Receipts This Page (optional)..... ►

88.60

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROBERT W BIRMAN

Mailing Address 7533 WHITLOCK PLACE

City
LINCOLNState
NEZip Code
68516FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.45

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412139

Amount of Each Receipt this Period

19.86

Full Name (Last, First, Middle Initial)

B. ROBERT W BIRMAN

Mailing Address 7533 WHITLOCK PLACE

City
LINCOLNState
NEZip Code
68516FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

453.31

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672935

Amount of Each Receipt this Period

19.86

Full Name (Last, First, Middle Initial)

C. SUSAN F BOMBECK

Mailing Address 506 Blackhawk Ct

City
LoomisState
CAZip Code
95650FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.41

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378834

Amount of Each Receipt this Period

16.20

SUBTOTAL of Receipts This Page (optional)..... ►

55.92

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SUSAN F BOMBECK

Mailing Address 506 Blackhawk Ct

City State Zip Code
 Loomis CA 95650

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.61

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412233

Amount of Each Receipt this Period

16.20

Full Name (Last, First, Middle Initial)

B. SUSAN F BOMBECK

Mailing Address 506 Blackhawk Ct

City State Zip Code
 Loomis CA 95650

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.81

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2673028

Amount of Each Receipt this Period

16.20

Full Name (Last, First, Middle Initial)

C. DOUGLAS L BORG

Mailing Address 11988 Crafton Hills Crt

City State Zip Code
 Yucaipa CA 92399

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Financial Sales Consultan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.29

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378830

Amount of Each Receipt this Period

33.49

SUBTOTAL of Receipts This Page (optional)..... ►

65.89

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DOUGLAS L BORG

Mailing Address 11988 Crafton Hills Crt

City State Zip Code
 Yucaipa CA 92399

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Financial Sales Consultan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

736.78

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412229

Amount of Each Receipt this Period

33.49

Full Name (Last, First, Middle Initial)

B. DOUGLAS L BORG

Mailing Address 11988 Crafton Hills Crt

City State Zip Code
 Yucaipa CA 92399

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Financial Sales Consultan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.27

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2673024

Amount of Each Receipt this Period

33.49

Full Name (Last, First, Middle Initial)

C. WILLIAM B BORST

Mailing Address 827 N. HADDOW AVENUE

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-B2B-Head of Strategic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.67

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378696

Amount of Each Receipt this Period

31.66

SUBTOTAL of Receipts This Page (optional)..... ►

98.64

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM B BORST

Mailing Address 827 N. HADDOW AVENUE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-B2B-Head of Strategic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.33

Date of Receipt

M M / D D / Y Y Y Y Y
10 31 2014

Transaction ID : A2014-2412096

Amount of Each Receipt this Period

31.66

Full Name (Last, First, Middle Initial)

B. WILLIAM B BORST

Mailing Address 827 N. HADDOW AVENUE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-B2B-Head of Strategic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

723.99

Date of Receipt

M M / D D / Y Y Y Y Y
11 14 2014

Transaction ID : A2014-2672893

Amount of Each Receipt this Period

31.66

Full Name (Last, First, Middle Initial)

C. GWEN K BOWN

Mailing Address 5220 SAWGRASS DR.

City State Zip Code
LINCOLN NE 68526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.47

Date of Receipt

M M / D D / Y Y Y Y Y
10 17 2014

Transaction ID : A2014-2378812

Amount of Each Receipt this Period

17.16

SUBTOTAL of Receipts This Page (optional)..... ►

80.48

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GWEN K BOWN

Mailing Address 5220 SAWGRASS DR.

City State Zip Code
 LINCOLN NE 68526

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.63

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412211

Amount of Each Receipt this Period

17.16

Full Name (Last, First, Middle Initial)

B. GWEN K BOWN

Mailing Address 5220 SAWGRASS DR.

City State Zip Code
 LINCOLN NE 68526

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.79

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2673007

Amount of Each Receipt this Period

17.16

Full Name (Last, First, Middle Initial)

C. LONDON B BRADLEY

Mailing Address 6350 S Langdale Way

City State Zip Code
 Aurora CO 80016

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.07

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378817

Amount of Each Receipt this Period

38.33

SUBTOTAL of Receipts This Page (optional)..... ►

72.65

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LONDON B BRADLEY

Mailing Address 6350 S Langdale Way

City State Zip Code
 Aurora CO 80016

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

838.40

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412216

Amount of Each Receipt this Period

38.33

Full Name (Last, First, Middle Initial)

B. LONDON B BRADLEY

Mailing Address 6350 S Langdale Way

City State Zip Code
 Aurora CO 80016

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

876.73

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2673012

Amount of Each Receipt this Period

38.33

Full Name (Last, First, Middle Initial)

C. KENNETH A BRANCH

Mailing Address 28955 NIBLICK KNOLL CT.

City State Zip Code
 IVANHOE IL 60060

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-APL-Independent Channe

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.02

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378796

Amount of Each Receipt this Period

23.34

SUBTOTAL of Receipts This Page (optional)..... ►

100.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KENNETH A BRANCH

Mailing Address 28955 NIBLICK KNOLL CT.

City State Zip Code
 IVANHOE IL 60060

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-APL-Independent Channe

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.36

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412196

Amount of Each Receipt this Period

23.34

Full Name (Last, First, Middle Initial)

B. KENNETH A BRANCH

Mailing Address 28955 NIBLICK KNOLL CT.

City State Zip Code
 IVANHOE IL 60060

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-APL-Independent Channe

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

534.70

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2672992

Amount of Each Receipt this Period

23.34

Full Name (Last, First, Middle Initial)

C. DUDLEY R BRIGHT

Mailing Address 18135 W MEANDER DR

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.05

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378637

Amount of Each Receipt this Period

21.41

SUBTOTAL of Receipts This Page (optional)..... ►

68.09

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DUDLEY R BRIGHT

Mailing Address 18135 W MEANDER DR

City State Zip Code
GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.46

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412038

Amount of Each Receipt this Period

21.41

Full Name (Last, First, Middle Initial)

B. DUDLEY R BRIGHT

Mailing Address 18135 W MEANDER DR

City State Zip Code
GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489.87

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672836

Amount of Each Receipt this Period

21.41

Full Name (Last, First, Middle Initial)

C. SHAWN L BROADFIELD

Mailing Address 1044 APPLE BLOSSOM COURT

City State Zip Code
LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Claims Technical E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.26

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378702

Amount of Each Receipt this Period

53.59

SUBTOTAL of Receipts This Page (optional)..... ►

96.41

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SHAWN L BROADFIELD

Mailing Address 1044 APPLE BLOSSOM COURT

City State Zip Code
 LAKE ZURICH IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Claims Technical E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

803.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412102

Amount of Each Receipt this Period

53.59

Full Name (Last, First, Middle Initial)

B. SHAWN L BROADFIELD

Mailing Address 1044 APPLE BLOSSOM COURT

City State Zip Code
 LAKE ZURICH IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Claims Technical E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

857.44

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2672898

Amount of Each Receipt this Period

53.59

Full Name (Last, First, Middle Initial)

C. LORRIE K BROUSE

Mailing Address 223 POLK PLACE DRIVE

City State Zip Code
 FRANKLIN TN 37064

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.59

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378651

Amount of Each Receipt this Period

40.80

SUBTOTAL of Receipts This Page (optional)..... ►

147.98

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PAMELA S BROWN

Mailing Address 5886 TEAL LANE

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.15

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378766

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

B. PAMELA S BROWN

Mailing Address 5886 TEAL LANE

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.15

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412166

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

C. PAMELA S BROWN

Mailing Address 5886 TEAL LANE

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.15

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672962

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANNE MARIE L BRUNNER

Mailing Address 2514 SOUTH WESLEY AVE

City
BERWYN

State Zip Code
IL 60402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

848.71

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378701

Amount of Each Receipt this Period

40.67

Full Name (Last, First, Middle Initial)

B. ANNE MARIE L BRUNNER

Mailing Address 2514 SOUTH WESLEY AVE

City
BERWYN

State Zip Code
IL 60402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

889.38

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412101

Amount of Each Receipt this Period

40.67

Full Name (Last, First, Middle Initial)

C. JOHN E BUCHANAN

Mailing Address 26 W. 690 LINDSEY AVE.

City
WINFIELD

State Zip Code
IL 60190

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.58

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378757

Amount of Each Receipt this Period

18.08

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

99.42

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN E BUCHANAN

Mailing Address 26 W. 690 LINDSEY AVE.

City	State	Zip Code
WINFIELD	IL	60190

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.66

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		31		2014

Transaction ID : A2014-2412157

Amount of Each Receipt this Period

18.08

Full Name (Last, First, Middle Initial)

B. JOHN E BUCHANAN

Mailing Address 26 W. 690 LINDSEY AVE.

City	State	Zip Code
WINFIELD	IL	60190

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.74

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		14		2014

Transaction ID : A2014-2672953

Amount of Each Receipt this Period

18.08

Full Name (Last, First, Middle Initial)

C. CHERI M BUCKLEY

Mailing Address 249 S. OLD CREEK RD

City	State	Zip Code
VERNON HILLS	IL	60061

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.11

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		17		2014

Transaction ID : A2014-2378762

Amount of Each Receipt this Period

13.47

SUBTOTAL of Receipts This Page (optional)..... ►

49.63

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CHERI M BUCKLEY

Mailing Address 249 S. OLD CREEK RD

City
VERNON HILLS

State Zip Code
IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.58

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412162

Amount of Each Receipt this Period

13.47

Full Name (Last, First, Middle Initial)

B. CHERI M BUCKLEY

Mailing Address 249 S. OLD CREEK RD

City
VERNON HILLS

State Zip Code
IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.05

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672958

Amount of Each Receipt this Period

13.47

Full Name (Last, First, Middle Initial)

C. MARK L BUKOWY

Mailing Address 1077 Devon Drive

City
Antioch

State Zip Code
IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.88

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378699

Amount of Each Receipt this Period

16.76

SUBTOTAL of Receipts This Page (optional)..... ►

43.70

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 282

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARK L BUKOWY

Mailing Address 1077 Devon Drive

City	State	Zip Code
Antioch	IL	60002

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2014

Transaction ID : A2014-2412099

Amount of Each Receipt this Period

16.76

Full Name (Last, First, Middle Initial)

B. MARK L BUKOWY

Mailing Address 1077 Devon Drive

City	State	Zip Code
Antioch	IL	60002

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2014

Transaction ID : A2014-2672896

Amount of Each Receipt this Period

16.76

Full Name (Last, First, Middle Initial)

C. TYRONE A BURNO

Mailing Address 868 CHARLTON ROAD

City	State	Zip Code
LAKE VILLA	IL	60046

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Workforce Relations-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2014

Transaction ID : A2014-2378634

Amount of Each Receipt this Period

17.38

SUBTOTAL of Receipts This Page (optional)..... ►

50.90

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 32 OF 282
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. TYRONE A BURNO

Mailing Address 868 CHARLTON ROAD

City State Zip Code
LAKE VILLA IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Workforce Relations-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.06

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412035

Amount of Each Receipt this Period

17.38

Full Name (Last, First, Middle Initial)

B. TYRONE A BURNO

Mailing Address 868 CHARLTON ROAD

City State Zip Code
LAKE VILLA IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Workforce Relations-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.44

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672833

Amount of Each Receipt this Period

17.38

Full Name (Last, First, Middle Initial)

C. GREGORY C BURNS

Mailing Address 2000 N. BROADMOOR LANE

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-HR-Client Partnership

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1225.45

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378630

Amount of Each Receipt this Period

58.85

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

93.61

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GREGORY C BURNS

Mailing Address 2000 N. BROADMOOR LANE

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-HR-Client Partnership

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1284.30

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412031

Amount of Each Receipt this Period

58.85

Full Name (Last, First, Middle Initial)

B. GREGORY C BURNS

Mailing Address 2000 N. BROADMOOR LANE

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-HR-Client Partnership

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1343.15

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2672829

Amount of Each Receipt this Period

58.85

Full Name (Last, First, Middle Initial)

C. ALICE M BYRNE

Mailing Address 4121 109TH STREET

City State Zip Code
 PLEASANT PRAIRI WI 53158

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1887.09

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378787

Amount of Each Receipt this Period

90.29

SUBTOTAL of Receipts This Page (optional)..... ►

207.99

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ALICE M BYRNE

Mailing Address 4121 109TH STREET

City State Zip Code
 PLEASANT PRAIRI WI 53158

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1977.38

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412187

Amount of Each Receipt this Period

90.29

Full Name (Last, First, Middle Initial)

B. ALICE M BYRNE

Mailing Address 4121 109TH STREET

City State Zip Code
 PLEASANT PRAIRI WI 53158

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2067.67

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672983

Amount of Each Receipt this Period

90.29

Full Name (Last, First, Middle Initial)

C. Alfredo M Cantoral

Mailing Address 1960 Clyde Dr

City State Zip Code
 Naperville IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.61

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378861

Amount of Each Receipt this Period

26.48

SUBTOTAL of Receipts This Page (optional)..... ►

207.06

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Alfredo M Cantoral

Mailing Address 1960 Clyde Dr

City

Naperville

State

IL

Zip Code

60565

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.09

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412260

Amount of Each Receipt this Period

26.48

Full Name (Last, First, Middle Initial)

B. Alfredo M Cantoral

Mailing Address 1960 Clyde Dr

City

Naperville

State

IL

Zip Code

60565

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.57

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673054

Amount of Each Receipt this Period

26.48

Full Name (Last, First, Middle Initial)

C. VIRGINIA O CHIAPPETTA

Mailing Address 165 ARLINGTON AVE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Communications-Sr Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.41

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378745

Amount of Each Receipt this Period

21.54

SUBTOTAL of Receipts This Page (optional)..... ►

74.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. VIRGINIA O CHIAPPETTA

Mailing Address 165 ARLINGTON AVE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Communications-Sr Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.95

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412145

Amount of Each Receipt this Period

21.54

Full Name (Last, First, Middle Initial)

B. VIRGINIA O CHIAPPETTA

Mailing Address 165 ARLINGTON AVE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Communications-Sr Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.49

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672941

Amount of Each Receipt this Period

21.54

Full Name (Last, First, Middle Initial)

C. BRIAN L CLARK

Mailing Address 257 Lake Circle

City

MADISON

State

MS

Zip Code

39110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-CAT Finance & Resp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.53

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378795

Amount of Each Receipt this Period

19.05

SUBTOTAL of Receipts This Page (optional)..... ►

62.13

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BRIAN L CLARK

Mailing Address 257 Lake Circle

City State Zip Code
MADISON MS 39110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-CAT Finance & Resp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.58

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412195

Amount of Each Receipt this Period

19.05

Full Name (Last, First, Middle Initial)

B. BRIAN L CLARK

Mailing Address 257 Lake Circle

City State Zip Code
MADISON MS 39110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-CAT Finance & Resp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.63

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672991

Amount of Each Receipt this Period

19.05

Full Name (Last, First, Middle Initial)

C. EDWARD T CLARK

Mailing Address 9484 Ashford Place

City State Zip Code
Brentwood TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

626.12

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378750

Amount of Each Receipt this Period

30.77

SUBTOTAL of Receipts This Page (optional)..... ►

68.87

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. EDWARD T CLARK

Mailing Address 9484 Ashford Place

City State Zip Code
Brentwood TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.89

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412150

Amount of Each Receipt this Period

30.77

Full Name (Last, First, Middle Initial)

B. EDWARD T CLARK

Mailing Address 9484 Ashford Place

City State Zip Code
Brentwood TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.66

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672946

Amount of Each Receipt this Period

30.77

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER W CLAY

Mailing Address 9832 Toscano Drive

City State Zip Code
ELK GROVE CA 95757

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.90

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378846

Amount of Each Receipt this Period

36.88

SUBTOTAL of Receipts This Page (optional)..... ►

98.42

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER W CLAY

Mailing Address 9832 Toscano Drive

City State Zip Code
ELK GROVE CA 95757

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

805.78

Date of Receipt

M M / D D / Y Y Y Y Y
10 31 2014

Transaction ID : A2014-2412245

Amount of Each Receipt this Period

36.88

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER W CLAY

Mailing Address 9832 Toscano Drive

City State Zip Code
ELK GROVE CA 95757

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

842.66

Date of Receipt

M M / D D / Y Y Y Y Y
11 14 2014

Transaction ID : A2014-2673039

Amount of Each Receipt this Period

36.88

Full Name (Last, First, Middle Initial)

C. DEBORAH L CLOUSER

Mailing Address 4667 TAMWORTH DR

City State Zip Code
PALM HARBOR FL 34685

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Regional Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.07

Date of Receipt

M M / D D / Y Y Y Y Y
10 17 2014

Transaction ID : A2014-2378748

Amount of Each Receipt this Period

33.41

SUBTOTAL of Receipts This Page (optional)..... ►

107.17

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH L CLOUSER

Mailing Address 4667 TAMWORTH DR

City State Zip Code
 PALM HARBOR FL 34685

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Regional Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.48

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412148

Amount of Each Receipt this Period

33.41

Full Name (Last, First, Middle Initial)

B. DEBORAH L CLOUSER

Mailing Address 4667 TAMWORTH DR

City State Zip Code
 PALM HARBOR FL 34685

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Regional Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

762.89

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672944

Amount of Each Receipt this Period

33.41

Full Name (Last, First, Middle Initial)

C. LISA D COCHRANE

Mailing Address 270 FAIRVIEW AVENUE

City State Zip Code
 WINNETKA IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-Integrated Mrktng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

817.45

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378723

Amount of Each Receipt this Period

39.13

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LISA D COCHRANE

Mailing Address 270 FAIRVIEW AVENUE

City
WINNETKA

State Zip Code
IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-Integrated Mrktng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.58

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412123

Amount of Each Receipt this Period

39.13

Full Name (Last, First, Middle Initial)

B. LISA D COCHRANE

Mailing Address 270 FAIRVIEW AVENUE

City
WINNETKA

State Zip Code
IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-Integrated Mrktng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

895.71

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672919

Amount of Each Receipt this Period

39.13

Full Name (Last, First, Middle Initial)

C. PATRICK E COCHRANE

Mailing Address 6911 Brimstone Lane

City
Fairfax Station

State Zip Code
VA 22039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.51

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378649

Amount of Each Receipt this Period

17.00

SUBTOTAL of Receipts This Page (optional)..... ►

95.26

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PATRICK E COCHRANE

Mailing Address 6911 Brimstone Lane

City State Zip Code
 Fairfax Station VA 22039

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.51

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412050

Amount of Each Receipt this Period

17.00

Full Name (Last, First, Middle Initial)

B. PATRICK E COCHRANE

Mailing Address 6911 Brimstone Lane

City State Zip Code
 Fairfax Station VA 22039

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.51

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672848

Amount of Each Receipt this Period

17.00

Full Name (Last, First, Middle Initial)

C. PATRICIA A COFFEY

Mailing Address 21200 W. KEPWICK

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Delivery & Risk M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.77

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378726

Amount of Each Receipt this Period

36.36

SUBTOTAL of Receipts This Page (optional)..... ►

70.36

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PATRICIA A COFFEY

Mailing Address 21200 W. KEPWICK

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Delivery & Risk M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

792.13

Date of Receipt

M M / D D / Y Y Y Y Y
10 31 2014

Transaction ID : A2014-2412126

Amount of Each Receipt this Period

36.36

Full Name (Last, First, Middle Initial)

B. PATRICIA A COFFEY

Mailing Address 21200 W. KEPWICK

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Delivery & Risk M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

828.49

Date of Receipt

M M / D D / Y Y Y Y Y
11 14 2014

Transaction ID : A2014-2672922

Amount of Each Receipt this Period

36.36

Full Name (Last, First, Middle Initial)

C. EDWARD T COLLINS

Mailing Address 809 DUNHILL COURT

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Public Policy Deve

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.53

Date of Receipt

M M / D D / Y Y Y Y Y
10 17 2014

Transaction ID : A2014-2378694

Amount of Each Receipt this Period

51.92

SUBTOTAL of Receipts This Page (optional)..... ►

124.64

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. EDWARD T COLLINS

Mailing Address 809 DUNHILL COURT

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Public Policy Deve

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1135.45

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412094

Amount of Each Receipt this Period

51.92

Full Name (Last, First, Middle Initial)

B. EDWARD T COLLINS

Mailing Address 809 DUNHILL COURT

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Public Policy Deve

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1187.37

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2672891

Amount of Each Receipt this Period

51.92

Full Name (Last, First, Middle Initial)

C. LARRY K CONLEE

Mailing Address 363 Kensington Ct.

City State Zip Code
 Palatine IL 60067

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.79

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378714

Amount of Each Receipt this Period

21.36

SUBTOTAL of Receipts This Page (optional)..... ►

125.20

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LARRY K CONLEE

Mailing Address 363 Kensington Ct.

City State Zip Code
Palatine IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

466.15

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412114

Amount of Each Receipt this Period

21.36

Full Name (Last, First, Middle Initial)

B. LARRY K CONLEE

Mailing Address 363 Kensington Ct.

City State Zip Code
Palatine IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.51

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672910

Amount of Each Receipt this Period

21.36

Full Name (Last, First, Middle Initial)

C. PETER T CORRIGAN

Mailing Address 28852 FOREST LAKE LANE

City State Zip Code
GREEN OAKS IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Group CIO Persona

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1431.45

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378598

Amount of Each Receipt this Period

69.36

SUBTOTAL of Receipts This Page (optional)..... ►

112.08

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PETER T CORRIGAN

Mailing Address 28852 FOREST LAKE LANE

City State Zip Code
GREEN OAKS IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Group CIO Persona

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.81

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2411999

Amount of Each Receipt this Period

69.36

Full Name (Last, First, Middle Initial)

B. PETER T CORRIGAN

Mailing Address 28852 FOREST LAKE LANE

City State Zip Code
GREEN OAKS IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Group CIO Persona

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1570.17

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672798

Amount of Each Receipt this Period

69.36

Full Name (Last, First, Middle Initial)

C. ERROL CRAMER

Mailing Address 1111 SARANAC AVE.

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.48

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378728

Amount of Each Receipt this Period

19.18

SUBTOTAL of Receipts This Page (optional)..... ►

157.90

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ERROL CRAMER

Mailing Address 1111 SARANAC AVE.

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.66

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412128

Amount of Each Receipt this Period

19.18

Full Name (Last, First, Middle Initial)

B. ERROL CRAMER

Mailing Address 1111 SARANAC AVE.

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.84

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2672924

Amount of Each Receipt this Period

19.18

Full Name (Last, First, Middle Initial)

C. RICHARD C CRIST Jr.

Mailing Address 3227 Meadow Lane

City State Zip Code
 Collegeville PA 19426

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1599.96

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378635

Amount of Each Receipt this Period

76.75

SUBTOTAL of Receipts This Page (optional)..... ►

115.11

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. RICHARD C CRIST Jr.

Mailing Address 3227 Meadow Lane

City State Zip Code
 Collegeville PA 19426

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1676.71

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412036

Amount of Each Receipt this Period

76.75

Full Name (Last, First, Middle Initial)

B. RICHARD C CRIST Jr.

Mailing Address 3227 Meadow Lane

City State Zip Code
 Collegeville PA 19426

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1753.46

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2672834

Amount of Each Receipt this Period

76.75

Full Name (Last, First, Middle Initial)

C. ROBERT W DANIELS

Mailing Address 1020 Pleasant Street, #1

City State Zip Code
 Oak Park IL 60302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

848.63

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378650

Amount of Each Receipt this Period

40.58

SUBTOTAL of Receipts This Page (optional)..... ►

194.08

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROBERT W DANIELS

Mailing Address 1020 Pleasant Street, #1

City

Oak Park

State

IL

Zip Code

60302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

889.21

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412051

Amount of Each Receipt this Period

40.58

Full Name (Last, First, Middle Initial)

B. JOHN A DAVISON

Mailing Address 2104 Butternut Ln

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-HO Leadership-Sr M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.90

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378658

Amount of Each Receipt this Period

18.78

Full Name (Last, First, Middle Initial)

C. JOHN A DAVISON

Mailing Address 2104 Butternut Ln

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-HO Leadership-Sr M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.68

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412058

Amount of Each Receipt this Period

18.78

SUBTOTAL of Receipts This Page (optional)..... ►

78.14

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN A DAVISON

Mailing Address 2104 Butternut Ln

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-HO Leadership-Sr M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.46

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672855

Amount of Each Receipt this Period

18.78

Full Name (Last, First, Middle Initial)

B. RANDALL S DECOURSEY

Mailing Address 1954 Oakwood Dr

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Contact Center Impl

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.25

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378695

Amount of Each Receipt this Period

45.86

Full Name (Last, First, Middle Initial)

C. RANDALL S DECOURSEY

Mailing Address 1954 Oakwood Dr

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Contact Center Impl

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.11

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412095

Amount of Each Receipt this Period

45.86

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. RANDALL S DECOURSEY

Mailing Address 1954 Oakwood Dr

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Contact Center Impl

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1044.97

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672892

Amount of Each Receipt this Period

45.86

Full Name (Last, First, Middle Initial)

B. JEFFREY F DEIGL

Mailing Address 453 PRAIRIE

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1196.11

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378761

Amount of Each Receipt this Period

57.20

Full Name (Last, First, Middle Initial)

C. JEFFREY F DEIGL

Mailing Address 453 PRAIRIE

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1253.31

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412161

Amount of Each Receipt this Period

57.20

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.26

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY F DEIGL

Mailing Address 453 PRAIRIE

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1310.51

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672957

Amount of Each Receipt this Period

57.20

Full Name (Last, First, Middle Initial)

B. DEIDRE B DERRIG

Mailing Address 460 TOWER ROAD

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.42

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378742

Amount of Each Receipt this Period

22.98

Full Name (Last, First, Middle Initial)

C. DEIDRE B DERRIG

Mailing Address 460 TOWER ROAD

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412142

Amount of Each Receipt this Period

22.98

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

103.16

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DEIDRE B DERRIG

Mailing Address 460 TOWER ROAD

City	State	Zip Code
BARRINGTON	IL	60010

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

526.38

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	14	/	2014

Transaction ID : A2014-2672938

Amount of Each Receipt this Period

22.98

Full Name (Last, First, Middle Initial)

B. Kristine DiGirolamo

Mailing Address 10123 NORTH RIVER ROAD

City	State	Zip Code
BARRINGTON HILLS	IL	60102

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.44

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	17	/	2014

Transaction ID : A2014-2378788

Amount of Each Receipt this Period

21.68

Full Name (Last, First, Middle Initial)

C. Kristine DiGirolamo

Mailing Address 10123 NORTH RIVER ROAD

City	State	Zip Code
BARRINGTON HILLS	IL	60102

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.12

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	31	/	2014

Transaction ID : A2014-2412188

Amount of Each Receipt this Period

21.68

SUBTOTAL of Receipts This Page (optional)..... ►

66.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Kristine DiGirolamo

Mailing Address 10123 NORTH RIVER ROAD

City State Zip Code
BARRINGTON HILLS IL 60102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.80

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672984

Amount of Each Receipt this Period

21.68

Full Name (Last, First, Middle Initial)

B. Victoria A Dinges

Mailing Address 421 Chapel Hill Lane

City State Zip Code
Northfield IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Ent. Social Resp.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1363.38

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378848

Amount of Each Receipt this Period

65.52

Full Name (Last, First, Middle Initial)

C. Victoria A Dinges

Mailing Address 421 Chapel Hill Lane

City State Zip Code
Northfield IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Ent. Social Resp.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1428.90

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412247

Amount of Each Receipt this Period

65.52

SUBTOTAL of Receipts This Page (optional)..... ►

152.72

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Victoria A Dinges

Mailing Address 421 Chapel Hill Lane

City State Zip Code
 Northfield IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Ent. Social Resp.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1494.42

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2673041

Amount of Each Receipt this Period

65.52

Full Name (Last, First, Middle Initial)

B. SARAH R DONAHUE

Mailing Address 4147 RFD

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Program Mgmt Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1288.12

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378743

Amount of Each Receipt this Period

61.47

Full Name (Last, First, Middle Initial)

C. SARAH R DONAHUE

Mailing Address 4147 RFD

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Program Mgmt Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1349.59

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412143

Amount of Each Receipt this Period

61.47

SUBTOTAL of Receipts This Page (optional)..... ►

188.46

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SARAH R DONAHUE

Mailing Address 4147 RFD

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Program Mgmt Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1411.06

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2672939

Amount of Each Receipt this Period

61.47

Full Name (Last, First, Middle Initial)

B. BRIAN M DONLAN

Mailing Address 3806 W. Devon Ave

City State Zip Code
 Lincolnwood IL 60712

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.23

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378809

Amount of Each Receipt this Period

21.72

Full Name (Last, First, Middle Initial)

C. BRIAN M DONLAN

Mailing Address 3806 W. Devon Ave

City State Zip Code
 Lincolnwood IL 60712

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.95

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412208

Amount of Each Receipt this Period

21.72

SUBTOTAL of Receipts This Page (optional)..... ►

104.91

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BRIAN M DONLAN

Mailing Address 3806 W. Devon Ave

City

Lincolnwood

State

IL

Zip Code

60712

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

497.67

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2673004

Amount of Each Receipt this Period

21.72

Full Name (Last, First, Middle Initial)

B. PATRICIA B DREXLER

Mailing Address 472 W. SYCAMORE ST.

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.66

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378682

Amount of Each Receipt this Period

32.73

Full Name (Last, First, Middle Initial)

C. PATRICIA B DREXLER

Mailing Address 472 W. SYCAMORE ST.

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

714.39

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412082

Amount of Each Receipt this Period

32.73

SUBTOTAL of Receipts This Page (optional)..... ►

87.18

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PATRICIA B DREXLER

Mailing Address 472 W. SYCAMORE ST.

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

747.12

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672879

Amount of Each Receipt this Period

32.73

Full Name (Last, First, Middle Initial)

B. Stacy Drumtra

Mailing Address 114 E. Euclid Ave

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.30

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378849

Amount of Each Receipt this Period

35.83

Full Name (Last, First, Middle Initial)

C. Stacy Drumtra

Mailing Address 114 E. Euclid Ave

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.13

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412248

Amount of Each Receipt this Period

35.83

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

104.39

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Stacy Drumtra

Mailing Address 114 E. Euclid Ave

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.96

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673042

Amount of Each Receipt this Period

35.83

Full Name (Last, First, Middle Initial)

B. SUSAN DUCHAK

Mailing Address 4815 HIGHLAND AVE.

City State Zip Code
DOWNERS GROVE IL 60515

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.38

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378843

Amount of Each Receipt this Period

15.48

Full Name (Last, First, Middle Initial)

C. SUSAN DUCHAK

Mailing Address 4815 HIGHLAND AVE.

City State Zip Code
DOWNERS GROVE IL 60515

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.86

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412242

Amount of Each Receipt this Period

15.48

SUBTOTAL of Receipts This Page (optional)..... ►

66.79

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SUSAN DUCHAK

Mailing Address 4815 HIGHLAND AVE.

City State Zip Code
DOWNERS GROVE IL 60515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.34

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673036

Amount of Each Receipt this Period

15.48

Full Name (Last, First, Middle Initial)

B. DONALD L DUFF

Mailing Address 2 Washington Ct..

City State Zip Code
STREAMWOOD IL 60107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AB2B ABI-Product Line-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.41

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378680

Amount of Each Receipt this Period

34.63

Full Name (Last, First, Middle Initial)

C. DONALD L DUFF

Mailing Address 2 Washington Ct..

City State Zip Code
STREAMWOOD IL 60107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AB2B ABI-Product Line-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

753.04

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412080

Amount of Each Receipt this Period

34.63

SUBTOTAL of Receipts This Page (optional)..... ►

84.74

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DONALD L DUFF

Mailing Address 2 Washington Ct..

City
STREAMWOOD

State Zip Code
IL 60107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AB2B ABI-Product Line-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

787.67

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672877

Amount of Each Receipt this Period

34.63

Full Name (Last, First, Middle Initial)

B. MICHAEL S DUNN

Mailing Address 18202 HARNISH RD.

City
ROSCOE

State Zip Code
IL 61073

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims-Project Mgmt-Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.75

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378733

Amount of Each Receipt this Period

29.17

Full Name (Last, First, Middle Initial)

C. MICHAEL S DUNN

Mailing Address 18202 HARNISH RD.

City
ROSCOE

State Zip Code
IL 61073

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims-Project Mgmt-Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.92

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412133

Amount of Each Receipt this Period

29.17

SUBTOTAL of Receipts This Page (optional)..... ►

92.97

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL S DUNN

Mailing Address 18202 HARNISH RD.

City State Zip Code
 ROSCOE IL 61073

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Project Mgmt-Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

667.09

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672929

Amount of Each Receipt this Period

29.17

Full Name (Last, First, Middle Initial)

B. DOUGLAS P DUPONT

Mailing Address 12 ESSEX LANE

City State Zip Code
 LINCOLNSHIRE IL 60069

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

MD-INV-Portfolio Manageme

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

616.98

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378783

Amount of Each Receipt this Period

29.38

Full Name (Last, First, Middle Initial)

C. DOUGLAS P DUPONT

Mailing Address 12 ESSEX LANE

City State Zip Code
 LINCOLNSHIRE IL 60069

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

MD-INV-Portfolio Manageme

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

646.36

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412183

Amount of Each Receipt this Period

29.38

SUBTOTAL of Receipts This Page (optional)..... ►

87.93

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DOUGLAS P DUPONT

Mailing Address 12 ESSEX LANE

City State Zip Code
 LINCOLNSHIRE IL 60069

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company MD-INV-Portfolio Manageme

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.74

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672979

Amount of Each Receipt this Period

29.38

Full Name (Last, First, Middle Initial)

B. JEFFREY P DWYER

Mailing Address 44 CHAMPLAIN COURT

City State Zip Code
 MANAHAWKIN NJ 08050

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company Claims-Field Leadership R

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.65

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378597

Amount of Each Receipt this Period

16.21

Full Name (Last, First, Middle Initial)

C. JEFFREY P DWYER

Mailing Address 44 CHAMPLAIN COURT

City State Zip Code
 MANAHAWKIN NJ 08050

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company Claims-Field Leadership R

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.86

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2411998

Amount of Each Receipt this Period

16.21

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

61.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 64 OF 282

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY P DWYER

Mailing Address 44 CHAMPLAIN COURT

City
MANAHAWKIN

State Zip Code
NJ 08050

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.07

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672797

Amount of Each Receipt this Period

16.21

Full Name (Last, First, Middle Initial)

B. Thomas V Ealy

Mailing Address 2601 N. Greenview Ave.

City
Chicago

State Zip Code
IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-B2B-President, Encomp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1742.79

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378862

Amount of Each Receipt this Period

82.99

Full Name (Last, First, Middle Initial)

C. Thomas V Ealy

Mailing Address 2601 N. Greenview Ave.

City
Chicago

State Zip Code
IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-B2B-President, Encomp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1825.78

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412261

Amount of Each Receipt this Period

82.99

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

182.19

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Thomas V Ealy

Mailing Address 2601 N. Greenview Ave.

City State Zip Code
 Chicago IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-B2B-President, Encomp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1908.77

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2673055

Amount of Each Receipt this Period

82.99

Full Name (Last, First, Middle Initial)

B. SHARON P EDWARDS

Mailing Address 469 E. HOME AVENUE

City State Zip Code
 PALATINE IL 60074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

INV-Financial Planning-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.17

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378700

Amount of Each Receipt this Period

11.28

Full Name (Last, First, Middle Initial)

C. SHARON P EDWARDS

Mailing Address 469 E. HOME AVENUE

City State Zip Code
 PALATINE IL 60074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

INV-Financial Planning-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.45

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412100

Amount of Each Receipt this Period

11.28

SUBTOTAL of Receipts This Page (optional)..... ►

105.55

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SHARON P EDWARDS

Mailing Address 469 E. HOME AVENUE

City State Zip Code
 PALATINE IL 60074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

INV-Financial Planning-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.73

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672897

Amount of Each Receipt this Period

11.28

Full Name (Last, First, Middle Initial)

B. ROBERT N EMMICH

Mailing Address 108 SADDLE CREEK COVE

City State Zip Code
 CANTON MS 39046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.28

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378838

Amount of Each Receipt this Period

18.95

Full Name (Last, First, Middle Initial)

C. ROBERT N EMMICH

Mailing Address 108 SADDLE CREEK COVE

City State Zip Code
 CANTON MS 39046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.23

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412237

Amount of Each Receipt this Period

18.95

SUBTOTAL of Receipts This Page (optional)..... ►

49.18

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KATHLEEN N ENRIGHT

Mailing Address 10323 TRUMBULL AVE

City
CHICAGO

State Zip Code
IL 60655

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1126.89

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378753

Amount of Each Receipt this Period

53.85

Full Name (Last, First, Middle Initial)

B. KATHLEEN N ENRIGHT

Mailing Address 10323 TRUMBULL AVE

City
CHICAGO

State Zip Code
IL 60655

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1180.74

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412153

Amount of Each Receipt this Period

53.85

Full Name (Last, First, Middle Initial)

C. KATHLEEN N ENRIGHT

Mailing Address 10323 TRUMBULL AVE

City
CHICAGO

State Zip Code
IL 60655

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1234.59

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672949

Amount of Each Receipt this Period

53.85

SUBTOTAL of Receipts This Page (optional)..... ►

161.55

TOTAL This Period (last page this line number only)..... ►

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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAN B EPSTEIN

Mailing Address 2975 ROSLYN LANE

City State Zip Code
BUFFALO GROVE IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412009

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. JAN B EPSTEIN

Mailing Address 2975 ROSLYN LANE

City State Zip Code
BUFFALO GROVE IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672808

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. MICHAEL L ESCOBAR

Mailing Address 660 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-HR-Diversity & Org. Ef

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1230.63

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378601

Amount of Each Receipt this Period

58.85

SUBTOTAL of Receipts This Page (optional)..... ►

98.85

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL L ESCOBAR

Mailing Address 660 BALMORAL LANE

City
INVERNESS

State Zip Code
IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-HR-Diversity & Org. Ef

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1289.48

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412002

Amount of Each Receipt this Period

58.85

Full Name (Last, First, Middle Initial)

B. MICHAEL L ESCOBAR

Mailing Address 660 BALMORAL LANE

City
INVERNESS

State Zip Code
IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-HR-Diversity & Org. Ef

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1348.33

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672801

Amount of Each Receipt this Period

58.85

Full Name (Last, First, Middle Initial)

C. CAROLYN A FILIPOVIC

Mailing Address 918 JUNIPER ROAD

City
GLENVIEW

State Zip Code
IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Ethics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

674.49

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378777

Amount of Each Receipt this Period

32.32

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.02

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CAROLYN A FILIPOVIC

Mailing Address 918 JUNIPER ROAD

City
GLENVIEW

State Zip Code
IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Ethics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

706.81

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412177

Amount of Each Receipt this Period

32.32

Full Name (Last, First, Middle Initial)

B. CAROLYN A FILIPOVIC

Mailing Address 918 JUNIPER ROAD

City
GLENVIEW

State Zip Code
IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Ethics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

739.13

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672973

Amount of Each Receipt this Period

32.32

Full Name (Last, First, Middle Initial)

C. STEVEN FINE

Mailing Address 40375 N. SEA EAGLE CT

City
ANTIOCH

State Zip Code
IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.14

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378628

Amount of Each Receipt this Period

28.46

SUBTOTAL of Receipts This Page (optional)..... ►

93.10

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN FINE

Mailing Address 40375 N. SEA EAGLE CT

City
ANTIOCH

State Zip Code
IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.60

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412029

Amount of Each Receipt this Period

28.46

Full Name (Last, First, Middle Initial)

B. STEVEN FINE

Mailing Address 40375 N. SEA EAGLE CT

City
ANTIOCH

State Zip Code
IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

652.06

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672827

Amount of Each Receipt this Period

28.46

Full Name (Last, First, Middle Initial)

C. ANGELA K FONTANA

Mailing Address 1280 WILD ROSE LANE

City
LAKE FOREST

State Zip Code
IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-LGL-Allstate Financial

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.18

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378811

Amount of Each Receipt this Period

54.33

SUBTOTAL of Receipts This Page (optional)..... ►

111.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANGELA K FONTANA

Mailing Address 1280 WILD ROSE LANE

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Allstate Financial

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1188.51

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412210

Amount of Each Receipt this Period

54.33

Full Name (Last, First, Middle Initial)

B. ANGELA K FONTANA

Mailing Address 1280 WILD ROSE LANE

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Allstate Financial

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1242.84

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2673006

Amount of Each Receipt this Period

54.33

Full Name (Last, First, Middle Initial)

C. SARA A FOSTER

Mailing Address 2216 BARRETT DR

City

ALGONQUIN

State

IL

Zip Code

60102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Six Sigma-Expert

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

737.29

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378713

Amount of Each Receipt this Period

35.54

SUBTOTAL of Receipts This Page (optional)..... ►

144.20

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SARA A FOSTER

Mailing Address 2216 BARRETT DR

City State Zip Code
 ALGONQUIN IL 60102

FEC ID number of contributing federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 ATO-Six Sigma-Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

772.83

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412113

Amount of Each Receipt this Period

35.54

Full Name (Last, First, Middle Initial)

B. SARA A FOSTER

Mailing Address 2216 BARRETT DR

City State Zip Code
 ALGONQUIN IL 60102

FEC ID number of contributing federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 ATO-Six Sigma-Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

808.37

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2672909

Amount of Each Receipt this Period

35.54

Full Name (Last, First, Middle Initial)

C. ANGELA M Fusco

Mailing Address 29 Tullach Place

City State Zip Code
 Stonebrae CA 94542

FEC ID number of contributing federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

899.61

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378636

Amount of Each Receipt this Period

43.28

SUBTOTAL of Receipts This Page (optional)..... ►

114.36

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANGELA M Fusco

Mailing Address 29 Tullach Place

City State Zip Code
 Stonebrae CA 94542

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

942.89

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412037

Amount of Each Receipt this Period

43.28

Full Name (Last, First, Middle Initial)

B. ANGELA M Fusco

Mailing Address 29 Tullach Place

City State Zip Code
 Stonebrae CA 94542

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

986.17

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2672835

Amount of Each Receipt this Period

43.28

Full Name (Last, First, Middle Initial)

C. VINCENT A FUSCO

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code
 DIX HILLS NY 11746

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

596.03

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378599

Amount of Each Receipt this Period

28.50

SUBTOTAL of Receipts This Page (optional)..... ►

115.06

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. VINCENT A FUSCO

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code
DIX HILLS NY 11746

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.53

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412000

Amount of Each Receipt this Period

28.50

Full Name (Last, First, Middle Initial)

B. VINCENT A FUSCO

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code
DIX HILLS NY 11746

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.03

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672799

Amount of Each Receipt this Period

28.50

Full Name (Last, First, Middle Initial)

C. ANNA M GALL

Mailing Address 1667 FLAGSTONE DRIVE

City State Zip Code
CRYSTAL LAKE IL 60014

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AB2B-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.81

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378678

Amount of Each Receipt this Period

17.75

SUBTOTAL of Receipts This Page (optional)..... ►

74.75

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANNA M GALL

Mailing Address 1667 FLAGSTONE DRIVE

City State Zip Code
CRYSTAL LAKE IL 60014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AB2B-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.56

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412078

Amount of Each Receipt this Period

17.75

Full Name (Last, First, Middle Initial)

B. ANNA M GALL

Mailing Address 1667 FLAGSTONE DRIVE

City State Zip Code
CRYSTAL LAKE IL 60014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AB2B-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.31

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672875

Amount of Each Receipt this Period

17.75

Full Name (Last, First, Middle Initial)

C. MARY C GARDNER

Mailing Address 4506 DEER TRAIL

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Privacy Sr. Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.42

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378632

Amount of Each Receipt this Period

13.74

SUBTOTAL of Receipts This Page (optional)..... ►

49.24

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARY C GARDNER

Mailing Address 4506 DEER TRAIL

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Privacy Sr. Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.16

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412033

Amount of Each Receipt this Period

13.74

Full Name (Last, First, Middle Initial)

B. MARY C GARDNER

Mailing Address 4506 DEER TRAIL

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Privacy Sr. Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.90

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2672831

Amount of Each Receipt this Period

13.74

Full Name (Last, First, Middle Initial)

C. NICK GEORGAKOPOULOS

Mailing Address 1129 N Mitchell Ave

City State Zip Code
 Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

848.25

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378718

Amount of Each Receipt this Period

40.77

SUBTOTAL of Receipts This Page (optional)..... ►

68.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 78 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. NICK GEORGAKOPOULOS

Mailing Address 1129 N Mitchell Ave

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

889.02

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412118

Amount of Each Receipt this Period

40.77

Full Name (Last, First, Middle Initial)

B. NICK GEORGAKOPOULOS

Mailing Address 1129 N Mitchell Ave

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

929.79

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672914

Amount of Each Receipt this Period

40.77

Full Name (Last, First, Middle Initial)

C. BONNIE S GILL

Mailing Address 1570 EDGEFIELD LANE

City State Zip Code
HOFFMAN ESTATES IL 60169

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.90

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378813

Amount of Each Receipt this Period

34.03

SUBTOTAL of Receipts This Page (optional)..... ►

115.57

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BONNIE S GILL

Mailing Address 1570 EDGEFIELD LANE

City State Zip Code
HOFFMAN ESTATES IL 60169

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.93

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412212

Amount of Each Receipt this Period

34.03

Full Name (Last, First, Middle Initial)

B. BONNIE S GILL

Mailing Address 1570 EDGEFIELD LANE

City State Zip Code
HOFFMAN ESTATES IL 60169

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

778.96

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673008

Amount of Each Receipt this Period

34.03

Full Name (Last, First, Middle Initial)

C. JOAN M GILMORE

Mailing Address 656 S BUCKINGHAM CT

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Director Litigation Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

962.82

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378602

Amount of Each Receipt this Period

46.08

SUBTOTAL of Receipts This Page (optional)..... ►

114.14

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOAN M GILMORE

Mailing Address 656 S BUCKINGHAM CT

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director Litigation Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.90

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412003

Amount of Each Receipt this Period

46.08

Full Name (Last, First, Middle Initial)

B. JOAN M GILMORE

Mailing Address 656 S BUCKINGHAM CT

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director Litigation Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1054.98

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672802

Amount of Each Receipt this Period

46.08

Full Name (Last, First, Middle Initial)

C. WILLIAM T GOFF

Mailing Address 310 Plantation Way

City

Roswell

State

GA

Zip Code

30075

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.39

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378603

Amount of Each Receipt this Period

23.02

SUBTOTAL of Receipts This Page (optional)..... ►

115.18

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM T GOFF

Mailing Address 310 Plantation Way

City State Zip Code
 Roswell GA 30075

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.41

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412004

Amount of Each Receipt this Period

23.02

Full Name (Last, First, Middle Initial)

B. WILLIAM T GOFF

Mailing Address 310 Plantation Way

City State Zip Code
 Roswell GA 30075

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.43

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2672803

Amount of Each Receipt this Period

23.02

Full Name (Last, First, Middle Initial)

C. DEBORAH M GOLAN

Mailing Address 921 CREEK BEND DR.

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Tax Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.28

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2672976

Amount of Each Receipt this Period

8.83

SUBTOTAL of Receipts This Page (optional)..... ►

54.87

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BRUCE R GOLDBERG

Mailing Address 10 MULBERRY LN

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

466.68

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378687

Amount of Each Receipt this Period

22.27

Full Name (Last, First, Middle Initial)

B. BRUCE R GOLDBERG

Mailing Address 10 MULBERRY LN

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.95

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412087

Amount of Each Receipt this Period

22.27

Full Name (Last, First, Middle Initial)

C. BRUCE R GOLDBERG

Mailing Address 10 MULBERRY LN

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.22

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672884

Amount of Each Receipt this Period

22.27

SUBTOTAL of Receipts This Page (optional)..... ►

66.81

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANN A GOULD

Mailing Address 4071 NEWPORT LANE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.77

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378835

Amount of Each Receipt this Period

36.57

Full Name (Last, First, Middle Initial)

B. ANN A GOULD

Mailing Address 4071 NEWPORT LANE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.34

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412234

Amount of Each Receipt this Period

36.57

Full Name (Last, First, Middle Initial)

C. ANN A GOULD

Mailing Address 4071 NEWPORT LANE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

837.91

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673029

Amount of Each Receipt this Period

36.57

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

109.71

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GEORGE F GRAWE

Mailing Address 801 N. Vail Avenue

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Staff & Retained C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1118.28

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378660

Amount of Each Receipt this Period

53.80

Full Name (Last, First, Middle Initial)

B. GEORGE F GRAWE

Mailing Address 801 N. Vail Avenue

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Staff & Retained C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1172.08

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412060

Amount of Each Receipt this Period

53.80

Full Name (Last, First, Middle Initial)

C. GEORGE F GRAWE

Mailing Address 801 N. Vail Avenue

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Staff & Retained C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1225.88

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672857

Amount of Each Receipt this Period

53.80

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

161.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KELLIE H GREEN

Mailing Address 150 Meadowlark Circle

City State Zip Code
 Lindenhurst IL 60046

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CE-Director Agency Suppor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.08

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378647

Amount of Each Receipt this Period

19.95

Full Name (Last, First, Middle Initial)

B. KELLIE H GREEN

Mailing Address 150 Meadowlark Circle

City State Zip Code
 Lindenhurst IL 60046

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CE-Director Agency Suppor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.03

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412048

Amount of Each Receipt this Period

19.95

Full Name (Last, First, Middle Initial)

C. KELLIE H GREEN

Mailing Address 150 Meadowlark Circle

City State Zip Code
 Lindenhurst IL 60046

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CE-Director Agency Suppor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.98

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672846

Amount of Each Receipt this Period

19.95

SUBTOTAL of Receipts This Page (optional)..... ►

59.85

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Mark A Green

Mailing Address 1711 Wildwood Ct

City State Zip Code
Glenview IL 60025

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-B2B-President, Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.37

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378855

Amount of Each Receipt this Period

65.72

Full Name (Last, First, Middle Initial)

B. Mark A Green

Mailing Address 1711 Wildwood Ct

City State Zip Code
Glenview IL 60025

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-B2B-President, Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1399.09

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412254

Amount of Each Receipt this Period

65.72

Full Name (Last, First, Middle Initial)

C. Mark A Green

Mailing Address 1711 Wildwood Ct

City State Zip Code
Glenview IL 60025

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-B2B-President, Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1464.81

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673048

Amount of Each Receipt this Period

65.72

SUBTOTAL of Receipts This Page (optional)..... ►

197.16

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JUDITH P GREFFIN

Mailing Address 338 North Kenilworth

City State Zip Code
OAK PARK IL 60302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-INV-Chief Investment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1607.94

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378667

Amount of Each Receipt this Period

77.31

Full Name (Last, First, Middle Initial)

B. JUDITH P GREFFIN

Mailing Address 338 North Kenilworth

City State Zip Code
OAK PARK IL 60302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-INV-Chief Investment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1685.25

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412067

Amount of Each Receipt this Period

77.31

Full Name (Last, First, Middle Initial)

C. JUDITH P GREFFIN

Mailing Address 338 North Kenilworth

City State Zip Code
OAK PARK IL 60302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-INV-Chief Investment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1762.56

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672865

Amount of Each Receipt this Period

77.31

SUBTOTAL of Receipts This Page (optional)..... ►

231.93

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. M'BA G GREGOIRE

Mailing Address 35 Linden Road

City

Lake Zurich

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director Litigation Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.97

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378837

Amount of Each Receipt this Period

21.46

Full Name (Last, First, Middle Initial)

B. M'BA G GREGOIRE

Mailing Address 35 Linden Road

City

Lake Zurich

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director Litigation Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.43

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412236

Amount of Each Receipt this Period

21.46

Full Name (Last, First, Middle Initial)

C. M'BA G GREGOIRE

Mailing Address 35 Linden Road

City

Lake Zurich

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director Litigation Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.89

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673031

Amount of Each Receipt this Period

21.46

SUBTOTAL of Receipts This Page (optional)..... ►

64.38

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARYLIN H GROOM

Mailing Address 170 ASPINWALL STREET

City
WESTBURY

State Zip Code
NY 11590

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.27

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378615

Amount of Each Receipt this Period

19.01

Full Name (Last, First, Middle Initial)

B. MARYLIN H GROOM

Mailing Address 170 ASPINWALL STREET

City
WESTBURY

State Zip Code
NY 11590

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.28

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412016

Amount of Each Receipt this Period

19.01

Full Name (Last, First, Middle Initial)

C. MARYLIN H GROOM

Mailing Address 170 ASPINWALL STREET

City
WESTBURY

State Zip Code
NY 11590

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.29

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672815

Amount of Each Receipt this Period

19.01

SUBTOTAL of Receipts This Page (optional)..... ►

57.03

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Gerard T GROUZARD

Mailing Address 943 W CAROLYN DR

City

PALATINE

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.03

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378685

Amount of Each Receipt this Period

16.75

Full Name (Last, First, Middle Initial)

B. Gerard T GROUZARD

Mailing Address 943 W CAROLYN DR

City

PALATINE

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.78

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412085

Amount of Each Receipt this Period

16.75

Full Name (Last, First, Middle Initial)

C. Gerard T GROUZARD

Mailing Address 943 W CAROLYN DR

City

PALATINE

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.53

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672882

Amount of Each Receipt this Period

16.75

SUBTOTAL of Receipts This Page (optional)..... ►

50.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GREGORY J GUIDOS

Mailing Address 6130 St. Andrews Ct.

City

Ponte Vedra Beach

State

FL

Zip Code

32082

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-B2B-President, Allsta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

701.85

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378776

Amount of Each Receipt this Period

33.70

Full Name (Last, First, Middle Initial)

B. GREGORY J GUIDOS

Mailing Address 6130 St. Andrews Ct.

City

Ponte Vedra Beach

State

FL

Zip Code

32082

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-B2B-President, Allsta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.55

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412176

Amount of Each Receipt this Period

33.70

Full Name (Last, First, Middle Initial)

C. GREGORY J GUIDOS

Mailing Address 6130 St. Andrews Ct.

City

Ponte Vedra Beach

State

FL

Zip Code

32082

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-B2B-President, Allsta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.25

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672972

Amount of Each Receipt this Period

33.70

SUBTOTAL of Receipts This Page (optional)..... ►

101.10

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Sanjay Gupta

Mailing Address 1971 Farnsworth Ln

City State Zip Code
Northbrook IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company EVP-Mktg, Innovation & Co

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1338.87

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378874

Amount of Each Receipt this Period

64.15

Full Name (Last, First, Middle Initial)

B. Sanjay Gupta

Mailing Address 1971 Farnsworth Ln

City State Zip Code
Northbrook IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company EVP-Mktg, Innovation & Co

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1403.02

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412273

Amount of Each Receipt this Period

64.15

Full Name (Last, First, Middle Initial)

C. Sanjay Gupta

Mailing Address 1971 Farnsworth Ln

City State Zip Code
Northbrook IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company EVP-Mktg, Innovation & Co

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1467.17

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673067

Amount of Each Receipt this Period

64.15

SUBTOTAL of Receipts This Page (optional)..... ►

192.45

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES W HAIDU

Mailing Address 3 South Wynstone

City

N. BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Chief Actuary

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

228.74

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378735

Amount of Each Receipt this Period

10.95

Full Name (Last, First, Middle Initial)

B. JAMES W HAIDU

Mailing Address 3 South Wynstone

City

N. BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Chief Actuary

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

239.69

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412135

Amount of Each Receipt this Period

10.95

Full Name (Last, First, Middle Initial)

C. JAMES W HAIDU

Mailing Address 3 South Wynstone

City

N. BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Chief Actuary

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.64

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672931

Amount of Each Receipt this Period

10.95

SUBTOTAL of Receipts This Page (optional)..... ►

32.85

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROBERT R HALPERN-GIVENS

Mailing Address 3001 SUTTON WOODS CT

City State Zip Code
 CRYSTAL LAKE IL 60012

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Payroll & Relocation-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.39

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378752

Amount of Each Receipt this Period

18.20

Full Name (Last, First, Middle Initial)

B. ROBERT R HALPERN-GIVENS

Mailing Address 3001 SUTTON WOODS CT

City State Zip Code
 CRYSTAL LAKE IL 60012

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Payroll & Relocation-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.59

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412152

Amount of Each Receipt this Period

18.20

Full Name (Last, First, Middle Initial)

C. ROBERT R HALPERN-GIVENS

Mailing Address 3001 SUTTON WOODS CT

City State Zip Code
 CRYSTAL LAKE IL 60012

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Payroll & Relocation-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.79

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672948

Amount of Each Receipt this Period

18.20

SUBTOTAL of Receipts This Page (optional)..... ►

54.60

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. RANDALL M HANSON

Mailing Address 840 ALLEGHANY

City
GRAYSLAKE

State Zip Code
IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims-HO Leadership-Dire

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

871.89

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378818

Amount of Each Receipt this Period

41.78

Full Name (Last, First, Middle Initial)

B. RANDALL M HANSON

Mailing Address 840 ALLEGHANY

City
GRAYSLAKE

State Zip Code
IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims-HO Leadership-Dire

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.67

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412217

Amount of Each Receipt this Period

41.78

Full Name (Last, First, Middle Initial)

C. RANDALL M HANSON

Mailing Address 840 ALLEGHANY

City
GRAYSLAKE

State Zip Code
IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims-HO Leadership-Dire

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.45

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673013

Amount of Each Receipt this Period

41.78

SUBTOTAL of Receipts This Page (optional)..... ►

125.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. David S Harper

Mailing Address 41 Lancaster Lane

City State Zip Code
Lincolnshire IL 60069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-FSS-Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1402.38

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378857

Amount of Each Receipt this Period

67.20

Full Name (Last, First, Middle Initial)

B. David S Harper

Mailing Address 41 Lancaster Lane

City State Zip Code
Lincolnshire IL 60069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-FSS-Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1469.58

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412256

Amount of Each Receipt this Period

67.20

Full Name (Last, First, Middle Initial)

c. David S Harper

Mailing Address 41 Lancaster Lane

City State Zip Code
Lincolnshire IL 60069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-FSS-Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1536.78

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673050

Amount of Each Receipt this Period

67.20

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

201.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Cheryl A Harris

Mailing Address 4136 Three Lakes Drive

City State Zip Code
 Long Grove IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SPS-Sourcing & Procur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1327.10

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378869

Amount of Each Receipt this Period

64.62

Full Name (Last, First, Middle Initial)

B. Cheryl A Harris

Mailing Address 4136 Three Lakes Drive

City State Zip Code
 Long Grove IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SPS-Sourcing & Procur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1391.72

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412268

Amount of Each Receipt this Period

64.62

Full Name (Last, First, Middle Initial)

C. Cheryl A Harris

Mailing Address 4136 Three Lakes Drive

City State Zip Code
 Long Grove IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SPS-Sourcing & Procur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1456.34

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2673062

Amount of Each Receipt this Period

64.62

SUBTOTAL of Receipts This Page (optional)..... ►

193.86

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Jacqueline J Hart

Mailing Address 1431 W. Walton

City

Chicago

State

IL

Zip Code

60622

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Field Administration Dire

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2014

Transaction ID : A2014-2378851

Amount of Each Receipt this Period

18.17

Full Name (Last, First, Middle Initial)

B. Jacqueline J Hart

Mailing Address 1431 W. Walton

City

Chicago

State

IL

Zip Code

60622

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Field Administration Dire

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

395.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2014

Transaction ID : A2014-2412250

Amount of Each Receipt this Period

18.17

Full Name (Last, First, Middle Initial)

C. Jacqueline J Hart

Mailing Address 1431 W. Walton

City

Chicago

State

IL

Zip Code

60622

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Field Administration Dire

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

414.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2014

Transaction ID : A2014-2673044

Amount of Each Receipt this Period

18.17

SUBTOTAL of Receipts This Page (optional)..... ►

54.51

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. James A Haskins

Mailing Address 511 Oak Knoll Road

City

Barrington

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Regional Presiden

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

803.04

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378871

Amount of Each Receipt this Period

100.38

Full Name (Last, First, Middle Initial)

B. James A Haskins

Mailing Address 511 Oak Knoll Road

City

Barrington

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Regional Presiden

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

903.42

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412270

Amount of Each Receipt this Period

100.38

Full Name (Last, First, Middle Initial)

C. James A Haskins

Mailing Address 511 Oak Knoll Road

City

Barrington

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Regional Presiden

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1003.80

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673064

Amount of Each Receipt this Period

100.38

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

301.14

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KEITH A HAUSCHILDT

Mailing Address 25 Players Club Villas Rd

City State Zip Code
Ponte Vedra FL 32082

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-B2B-Allstate Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.33

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378664

Amount of Each Receipt this Period

39.42

Full Name (Last, First, Middle Initial)

B. KEITH A HAUSCHILDT

Mailing Address 25 Players Club Villas Rd

City State Zip Code
Ponte Vedra FL 32082

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-B2B-Allstate Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

814.75

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412064

Amount of Each Receipt this Period

39.42

Full Name (Last, First, Middle Initial)

C. KEITH A HAUSCHILDT

Mailing Address 25 Players Club Villas Rd

City State Zip Code
Ponte Vedra FL 32082

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-B2B-Allstate Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.17

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672862

Amount of Each Receipt this Period

39.42

SUBTOTAL of Receipts This Page (optional)..... ►

118.26

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Troy M Hawkes

Mailing Address 2557 Kane Lane

City

Batavia

State

IL

Zip Code

60510

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

784.55

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378875

Amount of Each Receipt this Period

46.15

Full Name (Last, First, Middle Initial)

B. Troy M Hawkes

Mailing Address 2557 Kane Lane

City

Batavia

State

IL

Zip Code

60510

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

830.70

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412274

Amount of Each Receipt this Period

46.15

Full Name (Last, First, Middle Initial)

C. Troy M Hawkes

Mailing Address 2557 Kane Lane

City

Batavia

State

IL

Zip Code

60510

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

876.85

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673068

Amount of Each Receipt this Period

46.15

SUBTOTAL of Receipts This Page (optional)..... ►

138.45

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY R HEALY

Mailing Address 7452 BERKELEY CIRCLE

City State Zip Code
CASTLE ROCK CO 80108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.53

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378621

Amount of Each Receipt this Period

17.30

Full Name (Last, First, Middle Initial)

B. JEFFREY R HEALY

Mailing Address 7452 BERKELEY CIRCLE

City State Zip Code
CASTLE ROCK CO 80108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.83

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412022

Amount of Each Receipt this Period

17.30

Full Name (Last, First, Middle Initial)

C. JEFFREY R HEALY

Mailing Address 7452 BERKELEY CIRCLE

City State Zip Code
CASTLE ROCK CO 80108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.13

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672821

Amount of Each Receipt this Period

17.30

SUBTOTAL of Receipts This Page (optional)..... ►

51.90

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Jon E Hedegard

Mailing Address 1314 Rose St. NE

City Olympia State WA Zip Code 98506

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.68

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378876

Amount of Each Receipt this Period

33.23

Full Name (Last, First, Middle Initial)

B. Jon E Hedegard

Mailing Address 1314 Rose St. NE

City Olympia State WA Zip Code 98506

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

564.91

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412275

Amount of Each Receipt this Period

33.23

Full Name (Last, First, Middle Initial)

C. Jon E Hedegard

Mailing Address 1314 Rose St. NE

City Olympia State WA Zip Code 98506

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.14

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2673069

Amount of Each Receipt this Period

33.23

SUBTOTAL of Receipts This Page (optional)..... ►

99.69

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JASON J HEIGER

Mailing Address 990 INDIAN SPRING LANE

City State Zip Code
BUFFALO GROVE IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Audit Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.92

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378594

Amount of Each Receipt this Period

17.19

Full Name (Last, First, Middle Initial)

B. JASON J HEIGER

Mailing Address 990 INDIAN SPRING LANE

City State Zip Code
BUFFALO GROVE IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Audit Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.11

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2411995

Amount of Each Receipt this Period

17.19

Full Name (Last, First, Middle Initial)

C. JASON J HEIGER

Mailing Address 990 INDIAN SPRING LANE

City State Zip Code
BUFFALO GROVE IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Audit Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.30

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672794

Amount of Each Receipt this Period

17.19

SUBTOTAL of Receipts This Page (optional)..... ►

51.57

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. EYVONNA HEMPHILL

Mailing Address 337 46TH AVE

City

BELLWOOD

State

IL

Zip Code

60104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AB2B ABI-Qual & Compl-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.24

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378693

Amount of Each Receipt this Period

17.53

Full Name (Last, First, Middle Initial)

B. EYVONNA HEMPHILL

Mailing Address 337 46TH AVE

City

BELLWOOD

State

IL

Zip Code

60104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AB2B ABI-Qual & Compl-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.77

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412093

Amount of Each Receipt this Period

17.53

Full Name (Last, First, Middle Initial)

C. EYVONNA HEMPHILL

Mailing Address 337 46TH AVE

City

BELLWOOD

State

IL

Zip Code

60104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AB2B ABI-Qual & Compl-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.30

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672890

Amount of Each Receipt this Period

17.53

SUBTOTAL of Receipts This Page (optional)..... ►

52.59

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Barbara A Higgins

Mailing Address 2107 N Lakewood Ave

City State Zip Code
Chicago IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Customer Retentio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

790.66

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378872

Amount of Each Receipt this Period

37.85

Full Name (Last, First, Middle Initial)

B. Barbara A Higgins

Mailing Address 2107 N Lakewood Ave

City State Zip Code
Chicago IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Customer Retentio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

828.51

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412271

Amount of Each Receipt this Period

37.85

Full Name (Last, First, Middle Initial)

C. Barbara A Higgins

Mailing Address 2107 N Lakewood Ave

City State Zip Code
Chicago IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Customer Retentio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

866.36

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673065

Amount of Each Receipt this Period

37.85

SUBTOTAL of Receipts This Page (optional)..... ►

113.55

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. EDDIE H HILL

Mailing Address 8390 Burnt Chimney Road

City State Zip Code
Wirtz VA 24184

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.91

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378643

Amount of Each Receipt this Period

17.03

Full Name (Last, First, Middle Initial)

B. EDDIE H HILL

Mailing Address 8390 Burnt Chimney Road

City State Zip Code
Wirtz VA 24184

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.94

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412044

Amount of Each Receipt this Period

17.03

Full Name (Last, First, Middle Initial)

C. EDDIE H HILL

Mailing Address 8390 Burnt Chimney Road

City State Zip Code
Wirtz VA 24184

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.97

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672842

Amount of Each Receipt this Period

17.03

SUBTOTAL of Receipts This Page (optional)..... ►

51.09

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM G HILL

Mailing Address 2935 GLENARYE DRIVE

City State Zip Code
LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PRD-Regional Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2872.10

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378648

Amount of Each Receipt this Period

137.69

Full Name (Last, First, Middle Initial)

B. WILLIAM G HILL

Mailing Address 2935 GLENARYE DRIVE

City State Zip Code
LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PRD-Regional Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3009.79

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412049

Amount of Each Receipt this Period

137.69

Full Name (Last, First, Middle Initial)

C. WILLIAM G HILL

Mailing Address 2935 GLENARYE DRIVE

City State Zip Code
LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PRD-Regional Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3147.48

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672847

Amount of Each Receipt this Period

137.69

SUBTOTAL of Receipts This Page (optional)..... ►

413.07

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SHERYL L HODGES

Mailing Address 2510 OAK AVENUE

City
NORTHBROOK

State Zip Code
IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.68

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378722

Amount of Each Receipt this Period

15.51

Full Name (Last, First, Middle Initial)

B. SHERYL L HODGES

Mailing Address 2510 OAK AVENUE

City
NORTHBROOK

State Zip Code
IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.19

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412122

Amount of Each Receipt this Period

15.51

Full Name (Last, First, Middle Initial)

C. SHERYL L HODGES

Mailing Address 2510 OAK AVENUE

City
NORTHBROOK

State Zip Code
IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.70

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672918

Amount of Each Receipt this Period

15.51

SUBTOTAL of Receipts This Page (optional)..... ►

46.53

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROBERT J HOLDEN

Mailing Address 3012 Canton View Walk

City

Marietta

State

GA

Zip Code

30068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.99

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378629

Amount of Each Receipt this Period

9.64

Full Name (Last, First, Middle Initial)

B. ROBERT J HOLDEN

Mailing Address 3012 Canton View Walk

City

Marietta

State

GA

Zip Code

30068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.63

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412030

Amount of Each Receipt this Period

9.64

Full Name (Last, First, Middle Initial)

C. ROBERT J HOLDEN

Mailing Address 3012 Canton View Walk

City

Marietta

State

GA

Zip Code

30068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.27

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672828

Amount of Each Receipt this Period

9.64

SUBTOTAL of Receipts This Page (optional)..... ►

28.92

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARY L HUBER

Mailing Address 1532 NORTH BELMONT AVE.

City State Zip Code
 ARLINGTON HTS. IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Communications-Directo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.95

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378792

Amount of Each Receipt this Period

20.90

Full Name (Last, First, Middle Initial)

B. MARY L HUBER

Mailing Address 1532 NORTH BELMONT AVE.

City State Zip Code
 ARLINGTON HTS. IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Communications-Directo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.85

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412192

Amount of Each Receipt this Period

20.90

Full Name (Last, First, Middle Initial)

C. MARY L HUBER

Mailing Address 1532 NORTH BELMONT AVE.

City State Zip Code
 ARLINGTON HTS. IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Communications-Directo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.75

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672988

Amount of Each Receipt this Period

20.90

SUBTOTAL of Receipts This Page (optional)..... ►

62.70

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL S HURLEY

Mailing Address 1225 N. BURGANDY TRAIL

City

JACKSONVILLE

State

FL

Zip Code

32259

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Field Administration Dire

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.91

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378639

Amount of Each Receipt this Period

22.79

Full Name (Last, First, Middle Initial)

B. MICHAEL S HURLEY

Mailing Address 1225 N. BURGANDY TRAIL

City

JACKSONVILLE

State

FL

Zip Code

32259

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Field Administration Dire

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.70

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412040

Amount of Each Receipt this Period

22.79

Full Name (Last, First, Middle Initial)

C. MICHAEL S HURLEY

Mailing Address 1225 N. BURGANDY TRAIL

City

JACKSONVILLE

State

FL

Zip Code

32259

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Field Administration Dire

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.49

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672838

Amount of Each Receipt this Period

22.79

SUBTOTAL of Receipts This Page (optional)..... ►

68.37

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEPHEN L IHM

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-LGL-Corporate Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1089.87

Date of Receipt

M M / D D / Y Y Y Y Y
10 17 2014

Transaction ID : A2014-2378719

Amount of Each Receipt this Period

57.51

Full Name (Last, First, Middle Initial)

B. STEPHEN L IHM

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-LGL-Corporate Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.38

Date of Receipt

M M / D D / Y Y Y Y Y
10 31 2014

Transaction ID : A2014-2412119

Amount of Each Receipt this Period

57.51

Full Name (Last, First, Middle Initial)

C. STEPHEN L IHM

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-LGL-Corporate Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1204.89

Date of Receipt

M M / D D / Y Y Y Y Y
11 14 2014

Transaction ID : A2014-2672915

Amount of Each Receipt this Period

57.51

SUBTOTAL of Receipts This Page (optional)..... ►

172.53

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARIANO A IMBARRATO

Mailing Address 10825 CHUCER DRIVE

City State Zip Code
 WILLOW SPRINGS IL 60480

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Capital Planning &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1035.14

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378707

Amount of Each Receipt this Period

49.80

Full Name (Last, First, Middle Initial)

B. MARIANO A IMBARRATO

Mailing Address 10825 CHUCER DRIVE

City State Zip Code
 WILLOW SPRINGS IL 60480

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Capital Planning &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1084.94

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412107

Amount of Each Receipt this Period

49.80

Full Name (Last, First, Middle Initial)

C. MARIANO A IMBARRATO

Mailing Address 10825 CHUCER DRIVE

City State Zip Code
 WILLOW SPRINGS IL 60480

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Capital Planning &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.74

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672903

Amount of Each Receipt this Period

49.80

SUBTOTAL of Receipts This Page (optional)..... ►

149.40

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LYNNE A IVERSON

Mailing Address 890 BLAZING STAR TRAIL

City
CARY

State
IL

Zip Code
60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Product Operations Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

676.86

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378698

Amount of Each Receipt this Period

32.30

Full Name (Last, First, Middle Initial)

B. LYNNE A IVERSON

Mailing Address 890 BLAZING STAR TRAIL

City
CARY

State
IL

Zip Code
60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Product Operations Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.16

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412098

Amount of Each Receipt this Period

32.30

Full Name (Last, First, Middle Initial)

C. LYNNE A IVERSON

Mailing Address 890 BLAZING STAR TRAIL

City
CARY

State
IL

Zip Code
60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Product Operations Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

741.46

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672895

Amount of Each Receipt this Period

32.30

SUBTOTAL of Receipts This Page (optional)..... ►

96.90

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BOB A JACKSON

Mailing Address 226 Maison Court

City State Zip Code
 Altamonte Springs FL 32714

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

497.70

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378822

Amount of Each Receipt this Period

23.85

Full Name (Last, First, Middle Initial)

B. BOB A JACKSON

Mailing Address 226 Maison Court

City State Zip Code
 Altamonte Springs FL 32714

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.55

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412221

Amount of Each Receipt this Period

23.85

Full Name (Last, First, Middle Initial)

C. BOB A JACKSON

Mailing Address 226 Maison Court

City State Zip Code
 Altamonte Springs FL 32714

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.40

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2673016

Amount of Each Receipt this Period

23.85

SUBTOTAL of Receipts This Page (optional)..... ►

71.55

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CRAIG A JAMES

Mailing Address 235 HEATHER AVE

City State Zip Code
GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Six Sigma-Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.25

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378768

Amount of Each Receipt this Period

14.34

Full Name (Last, First, Middle Initial)

B. CRAIG A JAMES

Mailing Address 235 HEATHER AVE

City State Zip Code
GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Six Sigma-Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.59

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412168

Amount of Each Receipt this Period

14.34

Full Name (Last, First, Middle Initial)

C. CRAIG A JAMES

Mailing Address 235 HEATHER AVE

City State Zip Code
GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Six Sigma-Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.93

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672964

Amount of Each Receipt this Period

14.34

SUBTOTAL of Receipts This Page (optional)..... ►

43.02

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES C JAMIESON

Mailing Address 24160 North Beach Dr

City State Zip Code
 Cary IL 60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Real Estate & Constr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

855.15

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378683

Amount of Each Receipt this Period

40.94

Full Name (Last, First, Middle Initial)

B. JAMES C JAMIESON

Mailing Address 24160 North Beach Dr

City State Zip Code
 Cary IL 60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Real Estate & Constr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

896.09

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412083

Amount of Each Receipt this Period

40.94

Full Name (Last, First, Middle Initial)

C. JAMES C JAMIESON

Mailing Address 24160 North Beach Dr

City State Zip Code
 Cary IL 60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Real Estate & Constr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.03

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672880

Amount of Each Receipt this Period

40.94

SUBTOTAL of Receipts This Page (optional)..... ►

122.82

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Jerry A Johnson

Mailing Address 5233 Tree Way Lane South

City State Zip Code
 Jacksonville FL 32258

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AWD-Manager-Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.71

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378867

Amount of Each Receipt this Period

17.74

Full Name (Last, First, Middle Initial)

B. Jerry A Johnson

Mailing Address 5233 Tree Way Lane South

City State Zip Code
 Jacksonville FL 32258

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AWD-Manager-Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.45

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412266

Amount of Each Receipt this Period

17.74

Full Name (Last, First, Middle Initial)

C. Jerry A Johnson

Mailing Address 5233 Tree Way Lane South

City State Zip Code
 Jacksonville FL 32258

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AWD-Manager-Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.19

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2673060

Amount of Each Receipt this Period

17.74

SUBTOTAL of Receipts This Page (optional)..... ►

53.22

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES W JONSKE

Mailing Address 1217 BARCLAY CIRCLE

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Standard Auto

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

384.67

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378781

Amount of Each Receipt this Period

18.44

Full Name (Last, First, Middle Initial)

B. JAMES W JONSKE

Mailing Address 1217 BARCLAY CIRCLE

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Standard Auto

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

403.11

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412181

Amount of Each Receipt this Period

18.44

Full Name (Last, First, Middle Initial)

C. JAMES W JONSKE

Mailing Address 1217 BARCLAY CIRCLE

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Standard Auto

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

421.55

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672977

Amount of Each Receipt this Period

18.44

SUBTOTAL of Receipts This Page (optional)..... ►

55.32

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN A KANE

Mailing Address 2180 Trailblazer Way

City

Castle Rock

State

CO

Zip Code

80109

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.60

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378606

Amount of Each Receipt this Period

25.23

Full Name (Last, First, Middle Initial)

B. JOHN A KANE

Mailing Address 2180 Trailblazer Way

City

Castle Rock

State

CO

Zip Code

80109

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.83

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412007

Amount of Each Receipt this Period

25.23

Full Name (Last, First, Middle Initial)

C. JOHN A KANE

Mailing Address 2180 Trailblazer Way

City

Castle Rock

State

CO

Zip Code

80109

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.06

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672806

Amount of Each Receipt this Period

25.23

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. TIMOTHY M KATHRENS

Mailing Address 703 HIGHLAND CT

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Information Risk Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.68

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378786

Amount of Each Receipt this Period

18.30

Full Name (Last, First, Middle Initial)

B. TIMOTHY M KATHRENS

Mailing Address 703 HIGHLAND CT

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Information Risk Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.98

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412186

Amount of Each Receipt this Period

18.30

Full Name (Last, First, Middle Initial)

C. TIMOTHY M KATHRENS

Mailing Address 703 HIGHLAND CT

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Information Risk Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.28

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672982

Amount of Each Receipt this Period

18.30

SUBTOTAL of Receipts This Page (optional)..... ►

54.90

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Wilford J Kavanaugh

Mailing Address 7 Open Parkway North

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Pres. Allstate Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1209.64

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378864

Amount of Each Receipt this Period

58.08

Full Name (Last, First, Middle Initial)

B. Wilford J Kavanaugh

Mailing Address 7 Open Parkway North

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Pres. Allstate Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1267.72

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412263

Amount of Each Receipt this Period

58.08

Full Name (Last, First, Middle Initial)

C. Wilford J Kavanaugh

Mailing Address 7 Open Parkway North

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Pres. Allstate Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1325.80

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673057

Amount of Each Receipt this Period

58.08

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

174.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER R KIAH

Mailing Address 221 BRAMPTON LN

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ST-Protection Program

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1204.30

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378592

Amount of Each Receipt this Period

57.59

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER R KIAH

Mailing Address 221 BRAMPTON LN

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ST-Protection Program

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1261.89

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2411993

Amount of Each Receipt this Period

57.59

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER R KIAH

Mailing Address 221 BRAMPTON LN

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ST-Protection Program

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1319.48

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672792

Amount of Each Receipt this Period

57.59

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

172.77

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 125 OF 282
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CURTIS L KIBLER

Mailing Address 1332 BAY MEADOWS DR

City State Zip Code
BARTLETT IL 60103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Manager-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

938.69

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378684

Amount of Each Receipt this Period

44.98

Full Name (Last, First, Middle Initial)

B. CURTIS L KIBLER

Mailing Address 1332 BAY MEADOWS DR

City State Zip Code
BARTLETT IL 60103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Manager-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

983.67

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412084

Amount of Each Receipt this Period

44.98

Full Name (Last, First, Middle Initial)

C. CURTIS L KIBLER

Mailing Address 1332 BAY MEADOWS DR

City State Zip Code
BARTLETT IL 60103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Manager-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1028.65

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672881

Amount of Each Receipt this Period

44.98

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

134.94

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BARBARA L KILROY

Mailing Address 25396 W Columbia Bay Drive

City State Zip Code
 Lake Villa IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.74

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378641

Amount of Each Receipt this Period

21.62

Full Name (Last, First, Middle Initial)

B. BARBARA L KILROY

Mailing Address 25396 W Columbia Bay Drive

City State Zip Code
 Lake Villa IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.36

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412042

Amount of Each Receipt this Period

21.62

Full Name (Last, First, Middle Initial)

C. BARBARA L KILROY

Mailing Address 25396 W Columbia Bay Drive

City State Zip Code
 Lake Villa IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.98

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672840

Amount of Each Receipt this Period

21.62

SUBTOTAL of Receipts This Page (optional)..... ►

64.86

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANNE I KIM

Mailing Address 1580 SHERMAN AVE # 201

City State Zip Code
EVANSTON IL 60201

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company ATO-Manager-Sr Manager

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.22

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378764

Amount of Each Receipt this Period

22.05

Full Name (Last, First, Middle Initial)

B. ANNE I KIM

Mailing Address 1580 SHERMAN AVE # 201

City State Zip Code
EVANSTON IL 60201

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company ATO-Manager-Sr Manager

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.27

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412164

Amount of Each Receipt this Period

22.05

Full Name (Last, First, Middle Initial)

C. ANNE I KIM

Mailing Address 1580 SHERMAN AVE # 201

City State Zip Code
EVANSTON IL 60201

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company ATO-Manager-Sr Manager

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.32

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672960

Amount of Each Receipt this Period

22.05

SUBTOTAL of Receipts This Page (optional)..... ►

66.15

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Stephen B King

Mailing Address 1620 Monterey

City
Glenview

State Zip Code
IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-HR-Leadership & Talent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

646.75

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378853

Amount of Each Receipt this Period

30.92

Full Name (Last, First, Middle Initial)

B. Stephen B King

Mailing Address 1620 Monterey

City
Glenview

State Zip Code
IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-HR-Leadership & Talent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

677.67

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412252

Amount of Each Receipt this Period

30.92

Full Name (Last, First, Middle Initial)

C. Stephen B King

Mailing Address 1620 Monterey

City
Glenview

State Zip Code
IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-HR-Leadership & Talent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.59

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673046

Amount of Each Receipt this Period

30.92

SUBTOTAL of Receipts This Page (optional)..... ►

92.76

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Brian D Klemstein

Mailing Address 608 Haddon Circle

City	State	Zip Code
Vernon Hills	IL	60061

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Unclassified Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2014

Transaction ID : A2014-2378850

Amount of Each Receipt this Period

16.13

Full Name (Last, First, Middle Initial)

B. Brian D Klemstein

Mailing Address 608 Haddon Circle

City	State	Zip Code
Vernon Hills	IL	60061

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Unclassified Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2014

Transaction ID : A2014-2412249

Amount of Each Receipt this Period

16.13

Full Name (Last, First, Middle Initial)

C. Brian D Klemstein

Mailing Address 608 Haddon Circle

City	State	Zip Code
Vernon Hills	IL	60061

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Unclassified Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2014

Transaction ID : A2014-2673043

Amount of Each Receipt this Period

16.13

SUBTOTAL of Receipts This Page (optional)..... ►

48.39

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN T KLODZINSKI

Mailing Address 18699 W. State Line Road

City State Zip Code
 Antioch IL 60002

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.99

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378732

Amount of Each Receipt this Period

13.88

Full Name (Last, First, Middle Initial)

B. STEVEN T KLODZINSKI

Mailing Address 18699 W. State Line Road

City State Zip Code
 Antioch IL 60002

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.87

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412132

Amount of Each Receipt this Period

13.88

Full Name (Last, First, Middle Initial)

C. STEVEN T KLODZINSKI

Mailing Address 18699 W. State Line Road

City State Zip Code
 Antioch IL 60002

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.75

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2672928

Amount of Each Receipt this Period

13.88

SUBTOTAL of Receipts This Page (optional)..... ►

41.64

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. TIMOTHY L KNAPP

Mailing Address 132 FARMSTEAD CIRCLE

City
LEBANON

State Zip Code
PA 17042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.30

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378633

Amount of Each Receipt this Period

22.92

Full Name (Last, First, Middle Initial)

B. TIMOTHY L KNAPP

Mailing Address 132 FARMSTEAD CIRCLE

City
LEBANON

State Zip Code
PA 17042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.22

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412034

Amount of Each Receipt this Period

22.92

Full Name (Last, First, Middle Initial)

C. TIMOTHY L KNAPP

Mailing Address 132 FARMSTEAD CIRCLE

City
LEBANON

State Zip Code
PA 17042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.14

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672832

Amount of Each Receipt this Period

22.92

SUBTOTAL of Receipts This Page (optional)..... ►

68.76

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City
NORTHBROOK

State Zip Code
IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

803.67

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378816

Amount of Each Receipt this Period

38.51

Full Name (Last, First, Middle Initial)

B. JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City
NORTHBROOK

State Zip Code
IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

842.18

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412215

Amount of Each Receipt this Period

38.51

Full Name (Last, First, Middle Initial)

C. JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City
NORTHBROOK

State Zip Code
IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.69

Date of Receipt

M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673011

Amount of Each Receipt this Period

38.51

SUBTOTAL of Receipts This Page (optional)..... ►

115.53

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAIKRISHNA KUCHIMANCHI

Mailing Address 4513 Jenna Rd

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.29

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378756

Amount of Each Receipt this Period

36.71

Full Name (Last, First, Middle Initial)

B. JAIKRISHNA KUCHIMANCHI

Mailing Address 4513 Jenna Rd

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

802.00

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412156

Amount of Each Receipt this Period

36.71

Full Name (Last, First, Middle Initial)

C. JAIKRISHNA KUCHIMANCHI

Mailing Address 4513 Jenna Rd

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

838.71

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672952

Amount of Each Receipt this Period

36.71

SUBTOTAL of Receipts This Page (optional)..... ►

110.13

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. J Wayne W KULLMAN

Mailing Address 2005 Henley St.

City
GLENVIEWState Zip Code
IL 60025FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
VP-ST-Agency Sales Cross

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.72

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378656

Amount of Each Receipt this Period

24.60

Full Name (Last, First, Middle Initial)

B. J Wayne W KULLMAN

Mailing Address 2005 Henley St.

City
GLENVIEWState Zip Code
IL 60025FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
VP-ST-Agency Sales Cross

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.32

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412056

Amount of Each Receipt this Period

24.60

Full Name (Last, First, Middle Initial)

C. J Wayne W KULLMAN

Mailing Address 2005 Henley St.

City
GLENVIEWState Zip Code
IL 60025FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
VP-ST-Agency Sales Cross

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.92

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672853

Amount of Each Receipt this Period

24.60

SUBTOTAL of Receipts This Page (optional)..... ►

73.80

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY F LEASENDALE

Mailing Address 422 RIDGECREST RD, NE

City State Zip Code
ATLANTA GA 30307

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Lead Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.57

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378625

Amount of Each Receipt this Period

16.40

Full Name (Last, First, Middle Initial)

B. JEFFREY F LEASENDALE

Mailing Address 422 RIDGECREST RD, NE

City State Zip Code
ATLANTA GA 30307

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Lead Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.97

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412026

Amount of Each Receipt this Period

16.40

Full Name (Last, First, Middle Initial)

C. JEFFREY F LEASENDALE

Mailing Address 422 RIDGECREST RD, NE

City State Zip Code
ATLANTA GA 30307

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Lead Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.37

Date of Receipt

M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672825

Amount of Each Receipt this Period

16.40

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SUSAN L LEES

Mailing Address 1705 DARTMOUTH LN

City State Zip Code
DEERFIELD IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-LGL-Gen'l Counsel & C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2267.73

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378591

Amount of Each Receipt this Period

109.62

Full Name (Last, First, Middle Initial)

B. SUSAN L LEES

Mailing Address 1705 DARTMOUTH LN

City State Zip Code
DEERFIELD IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-LGL-Gen'l Counsel & C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2377.35

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2411992

Amount of Each Receipt this Period

109.62

Full Name (Last, First, Middle Initial)

C. SUSAN L LEES

Mailing Address 1705 DARTMOUTH LN

City State Zip Code
DEERFIELD IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-LGL-Gen'l Counsel & C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2486.97

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672791

Amount of Each Receipt this Period

109.62

SUBTOTAL of Receipts This Page (optional)..... ►

328.86

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GARY L LEVINE

Mailing Address 16340 W. Arlington Drive

City State Zip Code
Libertyville IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.13

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378802

Amount of Each Receipt this Period

-12.06

Full Name (Last, First, Middle Initial)

B. CHARLES M LITTLE

Mailing Address 20 STONEGATE POINT

City State Zip Code
HOT SPRINGS AR 71913

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.69

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378801

Amount of Each Receipt this Period

13.89

Full Name (Last, First, Middle Initial)

C. CHARLES M LITTLE

Mailing Address 20 STONEGATE POINT

City State Zip Code
HOT SPRINGS AR 71913

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.58

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412201

Amount of Each Receipt this Period

13.89

SUBTOTAL of Receipts This Page (optional)..... ►

15.72

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CHARLES M LITTLE

Mailing Address 20 STONEGATE POINT

City State Zip Code
HOT SPRINGS AR 71913

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.47

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672997

Amount of Each Receipt this Period

13.89

Full Name (Last, First, Middle Initial)

B. Peter G Logothetis

Mailing Address 2326 Indian Ridge Drive

City State Zip Code
Glenview IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1318.26

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378865

Amount of Each Receipt this Period

63.04

Full Name (Last, First, Middle Initial)

C. Peter G Logothetis

Mailing Address 2326 Indian Ridge Drive

City State Zip Code
Glenview IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1381.30

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412264

Amount of Each Receipt this Period

63.04

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

139.97

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Peter G Logothesis

Mailing Address 2326 Indian Ridge Drive

City State Zip Code
 Glenview IL 60026

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1444.34

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2673058

Amount of Each Receipt this Period

63.04

Full Name (Last, First, Middle Initial)

B. RHONDA J LOWE

Mailing Address 2501 Catoctin Court Unit 3A

City State Zip Code
 Frederick MD 21702

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.32

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378769

Amount of Each Receipt this Period

15.67

Full Name (Last, First, Middle Initial)

C. RHONDA J LOWE

Mailing Address 2501 Catoctin Court Unit 3A

City State Zip Code
 Frederick MD 21702

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.99

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412169

Amount of Each Receipt this Period

15.67

SUBTOTAL of Receipts This Page (optional)..... ►

94.38

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. RHONDA J LOWE

Mailing Address 2501 Catocin Court Unit 3A

City State Zip Code
 Frederick MD 21702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.66

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672965

Amount of Each Receipt this Period

15.67

Full Name (Last, First, Middle Initial)

B. GREGORY J LUCETT

Mailing Address P.O. BOX 9242

City State Zip Code
 GLENDALE CA 91226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Managing Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

777.52

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378836

Amount of Each Receipt this Period

37.37

Full Name (Last, First, Middle Initial)

C. GREGORY J LUCETT

Mailing Address P.O. BOX 9242

City State Zip Code
 GLENDALE CA 91226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Managing Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

814.89

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412235

Amount of Each Receipt this Period

37.37

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.41

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GREGORY J LUCETT

Mailing Address P.O. BOX 9242

City
GLENDALE

State Zip Code
CA 91226

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Managing Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

852.26

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673030

Amount of Each Receipt this Period

37.37

Full Name (Last, First, Middle Initial)

B. COREY C LUECHT

Mailing Address 843 Spring Cove Dr

City
SCHAUMBURG

State Zip Code
IL 60193

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SPS-Strategic Alliance-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.06

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378731

Amount of Each Receipt this Period

22.93

Full Name (Last, First, Middle Initial)

C. COREY C LUECHT

Mailing Address 843 Spring Cove Dr

City
SCHAUMBURG

State Zip Code
IL 60193

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SPS-Strategic Alliance-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.99

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412131

Amount of Each Receipt this Period

22.93

SUBTOTAL of Receipts This Page (optional)..... ►

83.23

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. COREY C LUECHT

Mailing Address 843 Spring Cove Dr

City
SCHAUMBURG

State Zip Code
IL 60193

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SPS-Strategic Alliance-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.92

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672927

Amount of Each Receipt this Period

22.93

Full Name (Last, First, Middle Initial)

B. BENJAMIN E LUMICAO

Mailing Address 9655 Woods Drive Unit 708

City
Skokie

State Zip Code
IL 60077

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

745.62

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378746

Amount of Each Receipt this Period

35.69

Full Name (Last, First, Middle Initial)

C. BENJAMIN E LUMICAO

Mailing Address 9655 Woods Drive Unit 708

City
Skokie

State Zip Code
IL 60077

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

781.31

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412146

Amount of Each Receipt this Period

35.69

SUBTOTAL of Receipts This Page (optional)..... ►

94.31

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BENJAMIN E LUMICAO

Mailing Address 9655 Woods Drive Unit 708

City
Skokie

State
IL

Zip Code
60077

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

817.00

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672942

Amount of Each Receipt this Period

35.69

Full Name (Last, First, Middle Initial)

B. Katherine A Mabe

Mailing Address 2750 Commons Drive

City

Glenview

State

IL

Zip Code

60026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-B2B-President, Busine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2350.32

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378863

Amount of Each Receipt this Period

111.92

Full Name (Last, First, Middle Initial)

C. Katherine A Mabe

Mailing Address 2750 Commons Drive

City

Glenview

State

IL

Zip Code

60026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-B2B-President, Busine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2462.24

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412262

Amount of Each Receipt this Period

111.92

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

259.53

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Katherine A Mabe

Mailing Address 2750 Commons Drive

City
Glenview

State Zip Code
IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
EVP-B2B-President, Busine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2574.16

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673056

Amount of Each Receipt this Period

111.92

Full Name (Last, First, Middle Initial)

B. DANIEL J MACDONALD

Mailing Address 2250 RIDGETRAIL DR

City
CASTLE ROCK

State Zip Code
CO 80104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
FSL - Growth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.88

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378791

Amount of Each Receipt this Period

22.90

Full Name (Last, First, Middle Initial)

C. DANIEL J MACDONALD

Mailing Address 2250 RIDGETRAIL DR

City
CASTLE ROCK

State Zip Code
CO 80104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
FSL - Growth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.78

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412191

Amount of Each Receipt this Period

22.90

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

157.72

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DANIEL J MACDONALD

Mailing Address 2250 RIDGETRAIL DR

City State Zip Code
CASTLE ROCK CO 80104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.68

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672987

Amount of Each Receipt this Period

22.90

Full Name (Last, First, Middle Initial)

B. KENNETH P MARCOTTE

Mailing Address 2311 HAVERTON DR

City State Zip Code
MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.35

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378692

Amount of Each Receipt this Period

24.48

Full Name (Last, First, Middle Initial)

C. KENNETH P MARCOTTE

Mailing Address 2311 HAVERTON DR

City State Zip Code
MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

534.83

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412092

Amount of Each Receipt this Period

24.48

SUBTOTAL of Receipts This Page (optional)..... ►

71.86

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KENNETH P MARCOTTE

Mailing Address 2311 HAVERTON DR

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.31

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2672889

Amount of Each Receipt this Period

24.48

Full Name (Last, First, Middle Initial)

B. Rhonda J Masser

Mailing Address 4807 Wildwood Dr

City State Zip Code
 McHenry IL 60051

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.69

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378673

Amount of Each Receipt this Period

20.69

Full Name (Last, First, Middle Initial)

C. Rhonda J Masser

Mailing Address 4807 Wildwood Dr

City State Zip Code
 McHenry IL 60051

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

453.38

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412073

Amount of Each Receipt this Period

20.69

SUBTOTAL of Receipts This Page (optional)..... ►

65.86

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Rhonda J Masser

Mailing Address 4807 Wildwood Dr

City

McHenry

State

IL

Zip Code

60051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.07

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672871

Amount of Each Receipt this Period

20.69

Full Name (Last, First, Middle Initial)

B. JOHN R MATHEWS

Mailing Address 401 E NORTH AVENUE

City

LAKE BLUFF

State

IL

Zip Code

60044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.29

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378747

Amount of Each Receipt this Period

22.87

Full Name (Last, First, Middle Initial)

C. JOHN R MATHEWS

Mailing Address 401 E NORTH AVENUE

City

LAKE BLUFF

State

IL

Zip Code

60044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.16

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412147

Amount of Each Receipt this Period

22.87

SUBTOTAL of Receipts This Page (optional)..... ►

66.43

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN R MATHEWS

Mailing Address 401 E NORTH AVENUE

City State Zip Code
LAKE BLUFF IL 60044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.03

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672943

Amount of Each Receipt this Period

22.87

Full Name (Last, First, Middle Initial)

B. JOHN A MC LAUGHLIN

Mailing Address 25748 N. Stoney Kirk Ct.

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

892.59

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378705

Amount of Each Receipt this Period

42.59

Full Name (Last, First, Middle Initial)

C. JOHN A MC LAUGHLIN

Mailing Address 25748 N. Stoney Kirk Ct.

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.18

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412105

Amount of Each Receipt this Period

42.59

SUBTOTAL of Receipts This Page (optional)..... ►

108.05

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN A MC LAUGHLIN

Mailing Address 25748 N. Stoney Kirk Ct.

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

977.77

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672901

Amount of Each Receipt this Period

42.59

Full Name (Last, First, Middle Initial)

B. LINDA H MCCLELLAN

Mailing Address 5561 Hilltop Lane

City State Zip Code
Libertyville IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.94

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378805

Amount of Each Receipt this Period

16.36

Full Name (Last, First, Middle Initial)

C. LINDA H MCCLELLAN

Mailing Address 5561 Hilltop Lane

City State Zip Code
Libertyville IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.30

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412204

Amount of Each Receipt this Period

16.36

SUBTOTAL of Receipts This Page (optional)..... ►

75.31

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LINDA H MCCLELLAN

Mailing Address 5561 Hilltop Lane

City State Zip Code
Libertyville IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.28

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673000

Amount of Each Receipt this Period

25.98

Full Name (Last, First, Middle Initial)

B. SCOTT A MCCONNELL

Mailing Address 21722 N TIMBER RIDGE CT

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

INV-IT Capital Markets-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.01

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378671

Amount of Each Receipt this Period

20.51

Full Name (Last, First, Middle Initial)

C. SCOTT A MCCONNELL

Mailing Address 21722 N TIMBER RIDGE CT

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

INV-IT Capital Markets-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.52

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412071

Amount of Each Receipt this Period

20.51

SUBTOTAL of Receipts This Page (optional)..... ►

67.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SCOTT A MCCONNELL

Mailing Address 21722 N TIMBER RIDGE CT

City
KILDEER

State
IL

Zip Code
60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

INV-IT Capital Markets-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

469.03

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672869

Amount of Each Receipt this Period

20.51

Full Name (Last, First, Middle Initial)

B. LEE L McElroy

Mailing Address 7808 ROYAL SYDNEY DR

City

GAINESVILLE

State

VA

Zip Code

20155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.02

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378832

Amount of Each Receipt this Period

18.05

Full Name (Last, First, Middle Initial)

C. LEE L McElroy

Mailing Address 7808 ROYAL SYDNEY DR

City

GAINESVILLE

State

VA

Zip Code

20155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.07

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412231

Amount of Each Receipt this Period

18.05

SUBTOTAL of Receipts This Page (optional)..... ►

56.61

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LEE L McElroy

Mailing Address 7808 ROYAL SYDNEY DR

City State Zip Code
GAINESVILLE VA 20155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.12

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673026

Amount of Each Receipt this Period

18.05

Full Name (Last, First, Middle Initial)

B. MARK A MCGILLIVRAY

Mailing Address 1028 PORTSMOUTH CIRCLE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CLM-Centralized Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.42

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378827

Amount of Each Receipt this Period

32.65

Full Name (Last, First, Middle Initial)

C. MARK A MCGILLIVRAY

Mailing Address 1028 PORTSMOUTH CIRCLE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CLM-Centralized Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

714.07

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412226

Amount of Each Receipt this Period

32.65

SUBTOTAL of Receipts This Page (optional)..... ►

83.35

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARK A MCGILLIVRAY

Mailing Address 1028 PORTSMOUTH CIRCLE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CLM-Centralized Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

746.72

Date of Receipt

M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673021

Amount of Each Receipt this Period

32.65

Full Name (Last, First, Middle Initial)

B. EVA M MCINTEE

Mailing Address 4109 W Bath Road

City State Zip Code
Akron OH 44333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.07

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378825

Amount of Each Receipt this Period

46.35

Full Name (Last, First, Middle Initial)

C. EVA M MCINTEE

Mailing Address 4109 W Bath Road

City State Zip Code
Akron OH 44333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1015.42

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412224

Amount of Each Receipt this Period

46.35

SUBTOTAL of Receipts This Page (optional)..... ►

125.35

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. EVA M MCINTEE

Mailing Address 4109 W Bath Road

City State Zip Code
Akron OH 44333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1061.77

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673019

Amount of Each Receipt this Period

46.35

Full Name (Last, First, Middle Initial)

B. JEFFREY J MCRAE

Mailing Address 83 Arcadia Lane

City State Zip Code
LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Technology Strate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.64

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378663

Amount of Each Receipt this Period

29.05

Full Name (Last, First, Middle Initial)

C. JEFFREY J MCRAE

Mailing Address 83 Arcadia Lane

City State Zip Code
LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Technology Strate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

634.69

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412063

Amount of Each Receipt this Period

29.05

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

104.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY J MCRAE

Mailing Address 83 Arcadia Lane

City

LAKE ZURICH

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Technology Strate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.74

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672860

Amount of Each Receipt this Period

29.05

Full Name (Last, First, Middle Initial)

B. Jesse E Merten

Mailing Address 3311 Brook Rd.

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.44

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378866

Amount of Each Receipt this Period

69.78

Full Name (Last, First, Middle Initial)

C. Jesse E Merten

Mailing Address 3311 Brook Rd.

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1520.22

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412265

Amount of Each Receipt this Period

69.78

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

168.61

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Jesse E Merten

Mailing Address 3311 Brook Rd.

City State Zip Code
Highland Park IL 60035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1590.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673059

Amount of Each Receipt this Period

69.78

Full Name (Last, First, Middle Initial)

B. HANS H METZINGER

Mailing Address 407 E. CLAIRE LANE

City State Zip Code
PROSPECT HTS IL 60070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.60

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378725

Amount of Each Receipt this Period

19.16

Full Name (Last, First, Middle Initial)

C. HANS H METZINGER

Mailing Address 407 E. CLAIRE LANE

City State Zip Code
PROSPECT HTS IL 60070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.76

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412125

Amount of Each Receipt this Period

19.16

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

108.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. HANS H METZINGER

Mailing Address 407 E. CLAIRE LANE

City State Zip Code
 PROSPECT HTS IL 60070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.92

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672921

Amount of Each Receipt this Period

19.16

Full Name (Last, First, Middle Initial)

B. JOHN W MICHELI

Mailing Address 2245 Hazeltine Drive

City State Zip Code
 Vernon Hills IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Cost Structure Ma

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.02

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378609

Amount of Each Receipt this Period

21.49

Full Name (Last, First, Middle Initial)

C. JOHN W MICHELI

Mailing Address 2245 Hazeltine Drive

City State Zip Code
 Vernon Hills IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Cost Structure Ma

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.51

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412010

Amount of Each Receipt this Period

21.49

SUBTOTAL of Receipts This Page (optional)..... ►

62.14

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN W MICHELI

Mailing Address 2245 Hazeltine Drive

City

Vernon Hills

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Cost Structure Ma

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672809

Amount of Each Receipt this Period

21.49

Full Name (Last, First, Middle Initial)

B. FREDERICK J MILLER

Mailing Address 16343 Smith Mountain Lake Parkway

City

Huddleston

State

VA

Zip Code

24104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.68

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378670

Amount of Each Receipt this Period

34.77

Full Name (Last, First, Middle Initial)

C. FREDERICK J MILLER

Mailing Address 16343 Smith Mountain Lake Parkway

City

Huddleston

State

VA

Zip Code

24104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.45

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412070

Amount of Each Receipt this Period

34.77

SUBTOTAL of Receipts This Page (optional)..... ►

91.03

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. FREDERICK J MILLER

Mailing Address 16343 Smith Mountain Lake Parkway

City State Zip Code
Huddleston VA 24104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.22

Date of Receipt

M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672868

Amount of Each Receipt this Period

34.77

Full Name (Last, First, Middle Initial)

B. STEVEN M MILLER

Mailing Address 436 N. Harrison St

City State Zip Code
ALGONQUIN IL 60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-AF-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.99

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378772

Amount of Each Receipt this Period

25.40

Full Name (Last, First, Middle Initial)

C. STEVEN M MILLER

Mailing Address 436 N. Harrison St

City State Zip Code
ALGONQUIN IL 60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-AF-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.39

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412172

Amount of Each Receipt this Period

25.40

SUBTOTAL of Receipts This Page (optional)..... ►

85.57

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN M MILLER

Mailing Address 436 N. Harrison St

City
ALGONQUIN

State Zip Code
IL 60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-AF-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.79

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672968

Amount of Each Receipt this Period

25.40

Full Name (Last, First, Middle Initial)

B. AMY B MILLS

Mailing Address 1145 Norman Lane

City
Deerfield

State Zip Code
IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.85

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378842

Amount of Each Receipt this Period

22.21

Full Name (Last, First, Middle Initial)

C. AMY B MILLS

Mailing Address 1145 Norman Lane

City
Deerfield

State Zip Code
IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.06

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412241

Amount of Each Receipt this Period

22.21

SUBTOTAL of Receipts This Page (optional)..... ►

69.82

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. AMY B MILLS

Mailing Address 1145 Norman Lane

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.27

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673035

Amount of Each Receipt this Period

22.21

Full Name (Last, First, Middle Initial)

B. ALLISON MISQUEZ

Mailing Address 578 Patriot Court

City

Gurnee

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.81

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378831

Amount of Each Receipt this Period

14.91

Full Name (Last, First, Middle Initial)

C. ALLISON MISQUEZ

Mailing Address 578 Patriot Court

City

Gurnee

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.72

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412230

Amount of Each Receipt this Period

14.91

SUBTOTAL of Receipts This Page (optional)..... ►

52.03

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ALLISON MISQUEZ

Mailing Address 578 Patriot Court

City State Zip Code
 Gurnee IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.63

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2673025

Amount of Each Receipt this Period

14.91

Full Name (Last, First, Middle Initial)

B. JAMES R MOSELEY III

Mailing Address 1709 Montclair Blvd

City State Zip Code
 Brentwood TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.75

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378653

Amount of Each Receipt this Period

17.16

Full Name (Last, First, Middle Initial)

C. JAMES R MOSELEY III

Mailing Address 1709 Montclair Blvd

City State Zip Code
 Brentwood TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.91

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412053

Amount of Each Receipt this Period

17.16

SUBTOTAL of Receipts This Page (optional)..... ►

49.23

TOTAL This Period (last page this line number only)..... ►

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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES R MOSELEY III

Mailing Address 1709 Montclair Blvd

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partner Field B

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

392.07

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672850

Amount of Each Receipt this Period

17.16

Full Name (Last, First, Middle Initial)

B. MEGHAN O MULVIHILL

Mailing Address 2445 CHERRY LANE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

State Filings Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

844.14

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378644

Amount of Each Receipt this Period

40.45

Full Name (Last, First, Middle Initial)

C. MEGHAN O MULVIHILL

Mailing Address 2445 CHERRY LANE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

State Filings Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

884.59

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412045

Amount of Each Receipt this Period

40.45

SUBTOTAL of Receipts This Page (optional)..... ►

98.06

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MEGHAN O MULVIHILL

Mailing Address 2445 CHERRY LANE

City
NORTHBROOK

State Zip Code
IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

State Filings Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.04

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672843

Amount of Each Receipt this Period

40.45

Full Name (Last, First, Middle Initial)

B. MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City
NORTHBROOK

State Zip Code
IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.42

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378689

Amount of Each Receipt this Period

44.87

Full Name (Last, First, Middle Initial)

C. MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City
NORTHBROOK

State Zip Code
IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

981.29

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412089

Amount of Each Receipt this Period

44.87

SUBTOTAL of Receipts This Page (optional)..... ►

130.19

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City
NORTHBROOK

State Zip Code
IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1026.16

Date of Receipt

M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672886

Amount of Each Receipt this Period

44.87

Full Name (Last, First, Middle Initial)

B. MICHAEL A MURPHY

Mailing Address 1908 N. Silver Lake Road

City
Arlington Heights

State Zip Code
IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

892.18

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378808

Amount of Each Receipt this Period

42.62

Full Name (Last, First, Middle Initial)

C. MICHAEL A MURPHY

Mailing Address 1908 N. Silver Lake Road

City
Arlington Heights

State Zip Code
IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

934.80

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412207

Amount of Each Receipt this Period

42.62

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.11

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL A MURPHY

Mailing Address 1908 N. Silver Lake Road

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

977.42

Date of Receipt

M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673003

Amount of Each Receipt this Period

42.62

Full Name (Last, First, Middle Initial)

B. DON J MYKETIAK

Mailing Address 28W770 HAWTHORNE LANE

City State Zip Code
WEST CHICAGO IL 60185

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Manager Accounting/Fi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.09

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378724

Amount of Each Receipt this Period

15.60

Full Name (Last, First, Middle Initial)

C. DON J MYKETIAK

Mailing Address 28W770 HAWTHORNE LANE

City State Zip Code
WEST CHICAGO IL 60185

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Manager Accounting/Fi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.69

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412124

Amount of Each Receipt this Period

15.60

SUBTOTAL of Receipts This Page (optional)..... ►

73.82

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DON J MYKETIAK

Mailing Address 28W770 HAWTHORNE LANE

City State Zip Code
 WEST CHICAGO IL 60185

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Manager Accounting/Fi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.29

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672920

Amount of Each Receipt this Period

15.60

Full Name (Last, First, Middle Initial)

B. DAVID G NADIG

Mailing Address 2950 LAKE PLACID

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Protection Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1395.23

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378763

Amount of Each Receipt this Period

66.72

Full Name (Last, First, Middle Initial)

C. DAVID G NADIG

Mailing Address 2950 LAKE PLACID

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Protection Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1461.95

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412163

Amount of Each Receipt this Period

66.72

SUBTOTAL of Receipts This Page (optional)..... ►

149.04

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DAVID G NADIG

Mailing Address 2950 LAKE PLACID

City
NORTHBROOK

State Zip Code
IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Protection Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1528.67

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672959

Amount of Each Receipt this Period

66.72

Full Name (Last, First, Middle Initial)

B. PATRICK K NOLL

Mailing Address 22451 THORNBURY CT

City
DEER PARK

State Zip Code
IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Enterprise Busine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.10

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378810

Amount of Each Receipt this Period

64.04

Full Name (Last, First, Middle Initial)

C. PATRICK K NOLL

Mailing Address 22451 THORNBURY CT

City
DEER PARK

State Zip Code
IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Enterprise Busine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1397.14

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412209

Amount of Each Receipt this Period

64.04

SUBTOTAL of Receipts This Page (optional)..... ►

194.80

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PATRICK K NOLL

Mailing Address 22451 THORNBURY CT

City	State	Zip Code
DEER PARK	IL	60010

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Enterprise Busine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1461.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	14	/	2014

Transaction ID : A2014-2673005

Amount of Each Receipt this Period

64.04

Full Name (Last, First, Middle Initial)

B. RICHARD C O'BRIEN

Mailing Address 574 S. COUNTRY RIDGE

City	State	Zip Code
LAKE ZURICH	IL	60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10	/	17	/	2014

Transaction ID : A2014-2378674

Amount of Each Receipt this Period

22.03

Full Name (Last, First, Middle Initial)

C. RICHARD C O'BRIEN

Mailing Address 574 S. COUNTRY RIDGE

City	State	Zip Code
LAKE ZURICH	IL	60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10	/	31	/	2014

Transaction ID : A2014-2412074

Amount of Each Receipt this Period

22.03

SUBTOTAL of Receipts This Page (optional)..... ►

108.10

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. RICHARD C O'BRIEN

Mailing Address 574 S. COUNTRY RIDGE

City State Zip Code
LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.16

Date of Receipt

M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672872

Amount of Each Receipt this Period

22.03

Full Name (Last, First, Middle Initial)

B. JOHN O'MALLEY

Mailing Address 1816 ASPEN LANE

City State Zip Code
MOUNT PROSPECT IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Retirement-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.29

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378740

Amount of Each Receipt this Period

17.42

Full Name (Last, First, Middle Initial)

C. JOHN O'MALLEY

Mailing Address 1816 ASPEN LANE

City State Zip Code
MOUNT PROSPECT IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Retirement-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.71

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412140

Amount of Each Receipt this Period

17.42

SUBTOTAL of Receipts This Page (optional)..... ►

56.87

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN O'MALLEY

Mailing Address 1816 ASPEN LANE

City State Zip Code
MOUNT PROSPECT IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company HR-Retirement-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.13

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672936

Amount of Each Receipt this Period

17.42

Full Name (Last, First, Middle Initial)

B. MICHAEL P O'SHEA

Mailing Address 2505 NEWPORT DRIVE

City State Zip Code
NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company FSL - Growth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.82

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378618

Amount of Each Receipt this Period

27.77

Full Name (Last, First, Middle Initial)

C. MICHAEL P O'SHEA

Mailing Address 2505 NEWPORT DRIVE

City State Zip Code
NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company FSL - Growth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.59

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412019

Amount of Each Receipt this Period

27.77

SUBTOTAL of Receipts This Page (optional)..... ►

72.96

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL P O'SHEA

Mailing Address 2505 NEWPORT DRIVE

City
NAPERVILLE

State Zip Code
IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
FSL - Growth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.36

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672818

Amount of Each Receipt this Period

27.77

Full Name (Last, First, Middle Initial)

B. BRIAN G O'SULLIVAN

Mailing Address 1609 ONEIDA COURT

City
MT PROSPECT

State Zip Code
IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.82

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378749

Amount of Each Receipt this Period

11.48

Full Name (Last, First, Middle Initial)

C. BRIAN G O'SULLIVAN

Mailing Address 1609 ONEIDA COURT

City
MT PROSPECT

State Zip Code
IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.30

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412149

Amount of Each Receipt this Period

11.48

SUBTOTAL of Receipts This Page (optional)..... ►

50.73

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BRIAN G O'SULLIVAN

Mailing Address 1609 ONEIDA COURT

City

MT PROSPECT

State

IL

Zip Code

60056

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Manager-Sr Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

262.78

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672945

Amount of Each Receipt this Period

11.48

Full Name (Last, First, Middle Initial)

B. MICHAEL C OCONNOR

Mailing Address 1231 Isabella Street

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

331.32

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378691

Amount of Each Receipt this Period

15.91

Full Name (Last, First, Middle Initial)

C. MICHAEL C OCONNOR

Mailing Address 1231 Isabella Street

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

347.23

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412091

Amount of Each Receipt this Period

15.91

SUBTOTAL of Receipts This Page (optional)..... ►

43.30

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL C OCONNOR

Mailing Address 1231 Isabella Street

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2014			

Transaction ID : A2014-2672888

Amount of Each Receipt this Period

15.91

Full Name (Last, First, Middle Initial)

B. KENNETH I OMURA

Mailing Address 361 KELBURN RD. #315

City

DEERFIELD

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

870.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2014			

Transaction ID : A2014-2378666

Amount of Each Receipt this Period

41.53

Full Name (Last, First, Middle Initial)

C. KENNETH I OMURA

Mailing Address 361 KELBURN RD. #315

City

DEERFIELD

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

911.59

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2014			

Transaction ID : A2014-2412066

Amount of Each Receipt this Period

41.53

SUBTOTAL of Receipts This Page (optional)..... ►

98.97

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KENNETH I OMURA

Mailing Address 361 KELBURN RD. #315

City State Zip Code
DEERFIELD IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.12

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672864

Amount of Each Receipt this Period

41.53

Full Name (Last, First, Middle Initial)

B. PAMELA J OVERTON

Mailing Address 23475 W. Newhaven Dr.

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Claims Product Lin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1063.84

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378662

Amount of Each Receipt this Period

51.03

Full Name (Last, First, Middle Initial)

C. PAMELA J OVERTON

Mailing Address 23475 W. Newhaven Dr.

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Claims Product Lin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1114.87

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412062

Amount of Each Receipt this Period

51.03

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

143.59

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PAMELA J OVERTON

Mailing Address 23475 W. Newhaven Dr.

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company VP-CLM-Claims Product Lin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1165.90

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672859

Amount of Each Receipt this Period

51.03

Full Name (Last, First, Middle Initial)

B. LAURIE PELLOUCHOUD

Mailing Address 1447 PLEASANT

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company VP-PRD-Homeowners

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

963.87

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378758

Amount of Each Receipt this Period

46.28

Full Name (Last, First, Middle Initial)

C. LAURIE PELLOUCHOUD

Mailing Address 1447 PLEASANT

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company VP-PRD-Homeowners

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1010.15

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412158

Amount of Each Receipt this Period

46.28

SUBTOTAL of Receipts This Page (optional)..... ►

143.59

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LAURIE PELLOUCHOUD

Mailing Address 1447 PLEASANT

City
GLENVIEWState Zip Code
IL 60025FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Homeowners

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1056.43

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672954

Amount of Each Receipt this Period

46.28

Full Name (Last, First, Middle Initial)

B. Opal G Perry

Mailing Address 2775 N. Sanders Rd.

City
NorthbrookState Zip Code
IL 60062FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-International COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

987.63

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378873

Amount of Each Receipt this Period

47.42

Full Name (Last, First, Middle Initial)

c. Opal G Perry

Mailing Address 2775 N. Sanders Rd.

City
NorthbrookState Zip Code
IL 60062FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-International COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1035.05

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412272

Amount of Each Receipt this Period

47.42

SUBTOTAL of Receipts This Page (optional)..... ►

141.12

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Opal G Perry

Mailing Address 2775 N. Sanders Rd.

City State Zip Code
Northbrook IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-ATO-International COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1082.47

Date of Receipt

M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673066

Amount of Each Receipt this Period

47.42

Full Name (Last, First, Middle Initial)

B. THOMAS S PETERSON

Mailing Address 2756 BRECKENRIDGE LANE

City State Zip Code
NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

743.76

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378845

Amount of Each Receipt this Period

35.64

Full Name (Last, First, Middle Initial)

C. THOMAS S PETERSON

Mailing Address 2756 BRECKENRIDGE LANE

City State Zip Code
NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

779.40

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412244

Amount of Each Receipt this Period

35.64

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

118.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS S PETERSON

Mailing Address 2756 BRECKENRIDGE LANE

City
NAPERVILLE

State Zip Code
IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.04

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673038

Amount of Each Receipt this Period

35.64

Full Name (Last, First, Middle Initial)

B. STEVEN A PETTI

Mailing Address 580 SALCEDA DR

City
MUNDELEIN

State Zip Code
IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PF-Property & Casualty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

893.12

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378612

Amount of Each Receipt this Period

55.82

Full Name (Last, First, Middle Initial)

C. STEVEN A PETTI

Mailing Address 580 SALCEDA DR

City
MUNDELEIN

State Zip Code
IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PF-Property & Casualty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

948.94

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412013

Amount of Each Receipt this Period

55.82

SUBTOTAL of Receipts This Page (optional)..... ►

147.28

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN A PETTI

Mailing Address 580 SALCEDA DR

City
MUNDELEIN

State Zip Code
IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PF-Property & Casualty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1004.76

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672812

Amount of Each Receipt this Period

55.82

Full Name (Last, First, Middle Initial)

B. JOHN C PINTOZZI

Mailing Address 2114 W Cortland ST

City
CHICAGO

State Zip Code
IL 60647

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-INV-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

873.15

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378679

Amount of Each Receipt this Period

41.84

Full Name (Last, First, Middle Initial)

C. JOHN C PINTOZZI

Mailing Address 2114 W Cortland ST

City
CHICAGO

State Zip Code
IL 60647

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-INV-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

914.99

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412079

Amount of Each Receipt this Period

41.84

SUBTOTAL of Receipts This Page (optional)..... ►

139.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN C PINTOZZI

Mailing Address 2114 W Cortland ST

City
CHICAGO

State Zip Code
IL 60647

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-INV-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

956.83

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672876

Amount of Each Receipt this Period

41.84

Full Name (Last, First, Middle Initial)

B. RICHARD E PORTER

Mailing Address 20827 36TH PL W

City
LYNNWOOD

State Zip Code
WA 98036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Adj TPLC Rep-Sr Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.84

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378828

Amount of Each Receipt this Period

11.08

Full Name (Last, First, Middle Initial)

C. RICHARD E PORTER

Mailing Address 20827 36TH PL W

City
LYNNWOOD

State Zip Code
WA 98036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Adj TPLC Rep-Sr Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.92

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412227

Amount of Each Receipt this Period

11.08

SUBTOTAL of Receipts This Page (optional)..... ►

64.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. RICHARD E PORTER

Mailing Address 20827 36TH PL W

City
LYNNWOOD

State Zip Code
WA 98036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Adj TPLC Rep-Sr Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.00

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2673022

Amount of Each Receipt this Period

11.08

Full Name (Last, First, Middle Initial)

B. DAVID J PRENDERGAST

Mailing Address 8262 Arrowleaf Turn

City
Gainesville

State Zip Code
VA 20155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Regional Presiden

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1739.46

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378607

Amount of Each Receipt this Period

83.08

Full Name (Last, First, Middle Initial)

C. DAVID J PRENDERGAST

Mailing Address 8262 Arrowleaf Turn

City
Gainesville

State Zip Code
VA 20155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Regional Presiden

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1822.54

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412008

Amount of Each Receipt this Period

83.08

SUBTOTAL of Receipts This Page (optional)..... ►

177.24

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DAVID J PRENDERGAST

Mailing Address 8262 Arrowleaf Turn

City

Gainesville

State

VA

Zip Code

20155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Regional Presiden

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1888.17

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672807

Amount of Each Receipt this Period

65.63

Full Name (Last, First, Middle Initial)

B. THOMAS G PURTELL

Mailing Address 22663 CHESHIRE COURT

City

DEER PARK

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Agent Comp-Dir

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.50

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378760

Amount of Each Receipt this Period

27.31

Full Name (Last, First, Middle Initial)

C. THOMAS G PURTELL

Mailing Address 22663 CHESHIRE COURT

City

DEER PARK

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Agent Comp-Dir

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.81

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412160

Amount of Each Receipt this Period

27.31

SUBTOTAL of Receipts This Page (optional)..... ►

120.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS G PURTELL

Mailing Address 22663 CHESHIRE COURT

City
DEER PARK

State
IL

Zip Code
60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Agent Comp-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.12

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672956

Amount of Each Receipt this Period

27.31

Full Name (Last, First, Middle Initial)

B. MARY J QUINN

Mailing Address 837 S. CHESTNUT AVENUE

City

ARLINGTON HEIGH

State

IL

Zip Code

60005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Investment Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.09

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378784

Amount of Each Receipt this Period

48.00

Full Name (Last, First, Middle Initial)

C. MARY J QUINN

Mailing Address 837 S. CHESTNUT AVENUE

City

ARLINGTON HEIGH

State

IL

Zip Code

60005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Investment Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1038.09

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412184

Amount of Each Receipt this Period

48.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

123.31

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARY J QUINN

Mailing Address 837 S. CHESTNUT AVENUE

City State Zip Code
 ARLINGTON HEIGH IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Investment Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1086.09

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672980

Amount of Each Receipt this Period

48.00

Full Name (Last, First, Middle Initial)

B. KEVIN P RICE

Mailing Address 618 Burdick St.

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

881.63

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378708

Amount of Each Receipt this Period

42.16

Full Name (Last, First, Middle Initial)

C. KEVIN P RICE

Mailing Address 618 Burdick St.

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.79

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412108

Amount of Each Receipt this Period

42.16

SUBTOTAL of Receipts This Page (optional)..... ►

132.32

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KEVIN P RICE

Mailing Address 618 Burdick St.

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Manager-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

965.95

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672904

Amount of Each Receipt this Period

42.16

Full Name (Last, First, Middle Initial)

B. MARIO RIZZO

Mailing Address 5926 W. 90TH PLACE

City State Zip Code
OAK LAWN IL 60453

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-APL-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1283.10

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378710

Amount of Each Receipt this Period

61.67

Full Name (Last, First, Middle Initial)

C. MARIO RIZZO

Mailing Address 5926 W. 90TH PLACE

City State Zip Code
OAK LAWN IL 60453

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-APL-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1344.77

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412110

Amount of Each Receipt this Period

61.67

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARIO RIZZO

Mailing Address 5926 W. 90TH PLACE

City State Zip Code
 OAK LAWN IL 60453

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1406.44

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672906

Amount of Each Receipt this Period

61.67

Full Name (Last, First, Middle Initial)

B. ROGER S ROBINSON

Mailing Address 535 6th Street North

City State Zip Code
 St. Petersburg FL 33701

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Regional Sr Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.72

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378657

Amount of Each Receipt this Period

26.88

Full Name (Last, First, Middle Initial)

C. ROGER S ROBINSON

Mailing Address 535 6th Street North

City State Zip Code
 St. Petersburg FL 33701

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Regional Sr Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.60

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412057

Amount of Each Receipt this Period

26.88

SUBTOTAL of Receipts This Page (optional)..... ►

115.43

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROGER S ROBINSON

Mailing Address 535 6th Street North

City	State	Zip Code
St. Petersburg	FL	33701

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Regional Sr Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

612.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2014

Transaction ID : A2014-2672854

Amount of Each Receipt this Period

26.88

Full Name (Last, First, Middle Initial)

B. GREGORY C ROHLFING

Mailing Address 106 ASHLAND

City	State	Zip Code
RIVER FOREST	IL	60305

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

949.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2014

Transaction ID : A2014-2378677

Amount of Each Receipt this Period

45.31

Full Name (Last, First, Middle Initial)

C. GREGORY C ROHLFING

Mailing Address 106 ASHLAND

City	State	Zip Code
RIVER FOREST	IL	60305

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

994.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2014

Transaction ID : A2014-2412077

Amount of Each Receipt this Period

45.31

SUBTOTAL of Receipts This Page (optional)..... ►

117.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GREGORY C ROHLFING

Mailing Address 106 ASHLAND

City
RIVER FOREST

State Zip Code
IL 60305

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.11

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672874

Amount of Each Receipt this Period

45.31

Full Name (Last, First, Middle Initial)

B. ANDREW R ROMERO

Mailing Address 3151 Montrose Way

City
El Dorado Hills

State Zip Code
CA 95762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.50

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378824

Amount of Each Receipt this Period

19.74

Full Name (Last, First, Middle Initial)

C. ANDREW R ROMERO

Mailing Address 3151 Montrose Way

City
El Dorado Hills

State Zip Code
CA 95762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.24

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412223

Amount of Each Receipt this Period

19.74

SUBTOTAL of Receipts This Page (optional)..... ►

84.79

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANDREW R ROMERO

Mailing Address 3151 Montrose Way

City State Zip Code
El Dorado Hills CA 95762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.98

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673018

Amount of Each Receipt this Period

19.74

Full Name (Last, First, Middle Initial)

B. JOHN ROSZKOWSKI

Mailing Address 3371 VENARD RD.

City State Zip Code
DOWNERS GROVE IL 60515

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.76

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378738

Amount of Each Receipt this Period

43.97

Full Name (Last, First, Middle Initial)

C. JOHN ROSZKOWSKI

Mailing Address 3371 VENARD RD.

City State Zip Code
DOWNERS GROVE IL 60515

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

959.73

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412138

Amount of Each Receipt this Period

43.97

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN ROSZKOWSKI

Mailing Address 3371 VENARD RD.

City State Zip Code
DOWNERS GROVE IL 60515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Manager-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1003.70

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672934

Amount of Each Receipt this Period

43.97

Full Name (Last, First, Middle Initial)

B. DONALD L RUDD

Mailing Address 25 CRESTVIEW TERRACE

City State Zip Code
BUFFALO GROVE IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Manager-Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.43

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378815

Amount of Each Receipt this Period

14.91

Full Name (Last, First, Middle Initial)

C. DONALD L RUDD

Mailing Address 25 CRESTVIEW TERRACE

City State Zip Code
BUFFALO GROVE IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Manager-Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.34

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412214

Amount of Each Receipt this Period

14.91

SUBTOTAL of Receipts This Page (optional)..... ►

73.79

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DONALD L RUDD

Mailing Address 25 CRESTVIEW TERRACE

City State Zip Code
BUFFALO GROVE IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.25

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673010

Amount of Each Receipt this Period

14.91

Full Name (Last, First, Middle Initial)

B. CASSANDRA C RUSSELL

Mailing Address 37194 N Dillon Ct

City State Zip Code
Lake Villa IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.11

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378798

Amount of Each Receipt this Period

17.19

Full Name (Last, First, Middle Initial)

C. CASSANDRA C RUSSELL

Mailing Address 37194 N Dillon Ct

City State Zip Code
Lake Villa IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.46

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412198

Amount of Each Receipt this Period

21.35

SUBTOTAL of Receipts This Page (optional)..... ►

53.45

TOTAL This Period (last page this line number only)..... ►

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(check only one)

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CASSANDRA C RUSSELL

Mailing Address 37194 N Dillon Ct

City

Lake Villa

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.38

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672994

Amount of Each Receipt this Period

18.92

Full Name (Last, First, Middle Initial)

B. PAUL R RYSKE

Mailing Address 898 LONGWOOD DR.

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

957.84

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378675

Amount of Each Receipt this Period

45.86

Full Name (Last, First, Middle Initial)

C. PAUL R RYSKE

Mailing Address 898 LONGWOOD DR.

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1003.70

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412075

Amount of Each Receipt this Period

45.86

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.64

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PAUL R RYSKE

Mailing Address 898 LONGWOOD DR.

City
LAKE FOREST

State Zip Code
IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1049.56

Date of Receipt

M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672873

Amount of Each Receipt this Period

45.86

Full Name (Last, First, Middle Initial)

B. Donald D Sands

Mailing Address 321 North Brainard Avenue

City
Lagrange Park

State Zip Code
IL 60526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-ST-Protection Project

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1185.92

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378858

Amount of Each Receipt this Period

56.77

Full Name (Last, First, Middle Initial)

C. Donald D Sands

Mailing Address 321 North Brainard Avenue

City
Lagrange Park

State Zip Code
IL 60526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-ST-Protection Project

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1242.69

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412257

Amount of Each Receipt this Period

56.77

SUBTOTAL of Receipts This Page (optional)..... ►

159.40

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Donald D Sands

Mailing Address 321 North Brainard Avenue

City State Zip Code
 Lagrange Park IL 60526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ST-Protection Project

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1299.46

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2673051

Amount of Each Receipt this Period

56.77

Full Name (Last, First, Middle Initial)

B. PATRICK J SARB

Mailing Address 4517 WAUBANSIE LANE

City State Zip Code
 LISLE IL 60532

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Environmental Sci-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.41

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378778

Amount of Each Receipt this Period

15.80

Full Name (Last, First, Middle Initial)

C. PATRICK J SARB

Mailing Address 4517 WAUBANSIE LANE

City State Zip Code
 LISLE IL 60532

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Environmental Sci-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.21

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412178

Amount of Each Receipt this Period

15.80

SUBTOTAL of Receipts This Page (optional)..... ►

88.37

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PATRICK J SARB

Mailing Address 4517 WAUBANSIE LANE

City State Zip Code
 LISLE IL 60532

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Environmental Sci-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.01

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672974

Amount of Each Receipt this Period

15.80

Full Name (Last, First, Middle Initial)

B. KAREN M SCHECHT

Mailing Address 754 Pinellas Bayway S

City State Zip Code
 Tierra Verde FL 33715

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.78

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378711

Amount of Each Receipt this Period

16.61

Full Name (Last, First, Middle Initial)

C. KAREN M SCHECHT

Mailing Address 754 Pinellas Bayway S

City State Zip Code
 Tierra Verde FL 33715

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.39

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412111

Amount of Each Receipt this Period

16.61

SUBTOTAL of Receipts This Page (optional)..... ►

49.02

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KAREN M SCHECHT

Mailing Address 754 Pinellas Bayway S

City State Zip Code
 Tierra Verde FL 33715

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672907

Amount of Each Receipt this Period

16.61

Full Name (Last, First, Middle Initial)

B. PATRICK J SCHNEIDER

Mailing Address 210 NORTH TRAIL

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

785.49

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378741

Amount of Each Receipt this Period

37.64

Full Name (Last, First, Middle Initial)

C. PATRICK J SCHNEIDER

Mailing Address 210 NORTH TRAIL

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.13

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412141

Amount of Each Receipt this Period

37.64

SUBTOTAL of Receipts This Page (optional)..... ►

91.89

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PATRICK J SCHNEIDER

Mailing Address 210 NORTH TRAIL

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.77

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2672937

Amount of Each Receipt this Period

37.64

Full Name (Last, First, Middle Initial)

B. STEPHEN E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1255.10

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378631

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. STEPHEN E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1315.10

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412032

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)..... ►

157.64

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEPHEN E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.10

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672830

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

B. DALE J SCHUELLER

Mailing Address 25 Scarlet Oak Rd

City State Zip Code
Flemington NJ 08822

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.48

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378814

Amount of Each Receipt this Period

22.09

Full Name (Last, First, Middle Initial)

C. DALE J SCHUELLER

Mailing Address 25 Scarlet Oak Rd

City State Zip Code
Flemington NJ 08822

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.57

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412213

Amount of Each Receipt this Period

22.09

SUBTOTAL of Receipts This Page (optional)..... ►

104.18

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DALE J SCHUELLER

Mailing Address 25 Scarlet Oak Rd

City State Zip Code
Flemington NJ 08822

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.66

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673009

Amount of Each Receipt this Period

22.09

Full Name (Last, First, Middle Initial)

B. Shayna M Schulz

Mailing Address 1523 Sheridan Road

City State Zip Code
Highland Park IL 60035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-APL-Customer Contact C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.41

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378859

Amount of Each Receipt this Period

16.59

Full Name (Last, First, Middle Initial)

C. Shayna M Schulz

Mailing Address 1523 Sheridan Road

City State Zip Code
Highland Park IL 60035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-APL-Customer Contact C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412258

Amount of Each Receipt this Period

16.59

SUBTOTAL of Receipts This Page (optional)..... ►

55.27

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Shayna M Schulz

Mailing Address 1523 Sheridan Road

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-APL-Customer Contact C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.59

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673052

Amount of Each Receipt this Period

16.59

Full Name (Last, First, Middle Initial)

B. PAUL SCHUTT

Mailing Address 6323 N. NORMANDY

City

CHICAGO

State

IL

Zip Code

60631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-INV-Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1174.01

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378709

Amount of Each Receipt this Period

56.37

Full Name (Last, First, Middle Initial)

C. PAUL SCHUTT

Mailing Address 6323 N. NORMANDY

City

CHICAGO

State

IL

Zip Code

60631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-INV-Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1230.38

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412109

Amount of Each Receipt this Period

56.37

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

129.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PAUL SCHUTT

Mailing Address 6323 N. NORMANDY

City State Zip Code
CHICAGO IL 60631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-INV-Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1286.75

Date of Receipt

M M / D D / Y Y Y Y Y
11 14 2014

Transaction ID : A2014-2672905

Amount of Each Receipt this Period

56.37

Full Name (Last, First, Middle Initial)

B. DAVID J SCHWARTZER

Mailing Address 128 Waverly Circle

City State Zip Code
Phoenixville PA 19460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1143.93

Date of Receipt

M M / D D / Y Y Y Y Y
10 17 2014

Transaction ID : A2014-2378790

Amount of Each Receipt this Period

54.82

Full Name (Last, First, Middle Initial)

C. DAVID J SCHWARTZER

Mailing Address 128 Waverly Circle

City State Zip Code
Phoenixville PA 19460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1198.75

Date of Receipt

M M / D D / Y Y Y Y Y
10 31 2014

Transaction ID : A2014-2412190

Amount of Each Receipt this Period

54.82

SUBTOTAL of Receipts This Page (optional)..... ►

166.01

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DAVID J SCHWARTZER

Mailing Address 128 Waverly Circle

City State Zip Code
Phoenixville PA 19460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1253.57

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672986

Amount of Each Receipt this Period

54.82

Full Name (Last, First, Middle Initial)

B. ALBERT SCHWARZHAUPT

Mailing Address 29 Doral Drive

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.75

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378616

Amount of Each Receipt this Period

18.15

Full Name (Last, First, Middle Initial)

C. ALBERT SCHWARZHAUPT

Mailing Address 29 Doral Drive

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.90

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412017

Amount of Each Receipt this Period

18.15

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

91.12

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ALBERT SCHWARZHAUPT

Mailing Address 29 Doral Drive

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.05

Date of Receipt

M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672816

Amount of Each Receipt this Period

18.15

Full Name (Last, First, Middle Initial)

B. STACY Y SHARPE

Mailing Address 1100 N. Lake Shore Drive

City State Zip Code
Chicago IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Strategic & Consum

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1156.91

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378734

Amount of Each Receipt this Period

55.73

Full Name (Last, First, Middle Initial)

C. STACY Y SHARPE

Mailing Address 1100 N. Lake Shore Drive

City State Zip Code
Chicago IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Strategic & Consum

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1212.64

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412134

Amount of Each Receipt this Period

55.73

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

129.61

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STACY Y SHARPE

Mailing Address 1100 N. Lake Shore Drive

City State Zip Code
Chicago IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Strategic & Consum

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1268.37

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672930

Amount of Each Receipt this Period

55.73

Full Name (Last, First, Middle Initial)

B. STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City State Zip Code
WHEATON IL 60189

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-FSS-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3049.54

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378715

Amount of Each Receipt this Period

173.08

Full Name (Last, First, Middle Initial)

C. STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City State Zip Code
WHEATON IL 60189

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-FSS-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3222.62

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412115

Amount of Each Receipt this Period

173.08

SUBTOTAL of Receipts This Page (optional)..... ►

401.89

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City
WHEATON

State Zip Code
IL 60189

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
EVP-FSS-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3395.70

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672911

Amount of Each Receipt this Period

173.08

Full Name (Last, First, Middle Initial)

B. STEVEN R SHEFFEY

Mailing Address 839 SUMAC

City
HIGHLAND PARK

State Zip Code
IL 60035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.02

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378672

Amount of Each Receipt this Period

21.95

Full Name (Last, First, Middle Initial)

C. STEVEN R SHEFFEY

Mailing Address 839 SUMAC

City
HIGHLAND PARK

State Zip Code
IL 60035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.97

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412072

Amount of Each Receipt this Period

21.95

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

216.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN R SHEFFEY

Mailing Address 839 SUMAC

City

HIGHLAND PARK

State

IL

Zip Code

60035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.92

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672870

Amount of Each Receipt this Period

21.95

Full Name (Last, First, Middle Initial)

B. ADAM R SHORES

Mailing Address 680 Brookstone Road

City

Grayslake

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.34

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378841

Amount of Each Receipt this Period

28.83

Full Name (Last, First, Middle Initial)

C. ADAM R SHORES

Mailing Address 680 Brookstone Road

City

Grayslake

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.17

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412240

Amount of Each Receipt this Period

28.83

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

79.61

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ADAM R SHORES

Mailing Address 680 Brookstone Road

City State Zip Code
Grayslake IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

659.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673034

Amount of Each Receipt this Period

28.83

Full Name (Last, First, Middle Initial)

B. DENIS C SHUNTA

Mailing Address 5200 RIDGEGATE WAY

City State Zip Code
FAIR OAKS CA 95628

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.83

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378775

Amount of Each Receipt this Period

24.19

Full Name (Last, First, Middle Initial)

C. DENIS C SHUNTA

Mailing Address 5200 RIDGEGATE WAY

City State Zip Code
FAIR OAKS CA 95628

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.02

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412175

Amount of Each Receipt this Period

24.19

SUBTOTAL of Receipts This Page (optional)..... ►

77.21

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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PAGE 209 OF 282

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DENIS C SHUNTA

Mailing Address 5200 RIDGEGATE WAY

City State Zip Code
 FAIR OAKS CA 95628

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.21

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672971

Amount of Each Receipt this Period

24.19

Full Name (Last, First, Middle Initial)

B. JAVIER SILVA

Mailing Address 3549 N. OZANAM

City State Zip Code
 CHICAGO IL 60634

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Senior Operations Divisio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.11

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378686

Amount of Each Receipt this Period

13.45

Full Name (Last, First, Middle Initial)

C. JAVIER SILVA

Mailing Address 3549 N. OZANAM

City State Zip Code
 CHICAGO IL 60634

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Senior Operations Divisio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.56

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412086

Amount of Each Receipt this Period

13.45

SUBTOTAL of Receipts This Page (optional)..... ►

51.09

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAVIER SILVA

Mailing Address 3549 N. OZANAM

City
CHICAGO

State Zip Code
IL 60634

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Operations Divisio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.01

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672883

Amount of Each Receipt this Period

13.45

Full Name (Last, First, Middle Initial)

B. ROBERT L SIMMONS

Mailing Address 1146 39th Ave, NE

City
St Petersburg

State Zip Code
FL 33703

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.36

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378624

Amount of Each Receipt this Period

36.36

Full Name (Last, First, Middle Initial)

C. ROBERT L SIMMONS

Mailing Address 1146 39th Ave, NE

City
St Petersburg

State Zip Code
FL 33703

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.72

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412025

Amount of Each Receipt this Period

36.36

SUBTOTAL of Receipts This Page (optional)..... ►

86.17

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROBERT L SIMMONS

Mailing Address 1146 39th Ave, NE

City State Zip Code
St Petersburg FL 33703

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.08

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672824

Amount of Each Receipt this Period

36.36

Full Name (Last, First, Middle Initial)

B. KIMBALL S SIMON

Mailing Address 11 WEHRHEIM

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

892.34

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378821

Amount of Each Receipt this Period

42.67

Full Name (Last, First, Middle Initial)

C. KIMBALL S SIMON

Mailing Address 11 WEHRHEIM

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

964.64

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412220

Amount of Each Receipt this Period

72.30

SUBTOTAL of Receipts This Page (optional)..... ►

151.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN G SINICKI

Mailing Address 2117 CARROLL CREEK VIEW CT

City State Zip Code
FREDERICK MD 21702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Mgmt OS Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.68

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378661

Amount of Each Receipt this Period

12.89

Full Name (Last, First, Middle Initial)

B. JOHN G SINICKI

Mailing Address 2117 CARROLL CREEK VIEW CT

City State Zip Code
FREDERICK MD 21702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Mgmt OS Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.57

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412061

Amount of Each Receipt this Period

12.89

Full Name (Last, First, Middle Initial)

C. JOHN G SINICKI

Mailing Address 2117 CARROLL CREEK VIEW CT

City State Zip Code
FREDERICK MD 21702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Mgmt OS Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.46

Date of Receipt

M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672858

Amount of Each Receipt this Period

12.89

SUBTOTAL of Receipts This Page (optional)..... ►

38.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KIMBERLY J SLOANE

Mailing Address 650 Rochelle Terrace

City

LOMBARD

State

IL

Zip Code

60148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Risk Management Senior Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.84

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378730

Amount of Each Receipt this Period

31.33

Full Name (Last, First, Middle Initial)

B. KIMBERLY J SLOANE

Mailing Address 650 Rochelle Terrace

City

LOMBARD

State

IL

Zip Code

60148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Risk Management Senior Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.17

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412130

Amount of Each Receipt this Period

31.33

Full Name (Last, First, Middle Initial)

C. KIMBERLY J SLOANE

Mailing Address 650 Rochelle Terrace

City

LOMBARD

State

IL

Zip Code

60148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Risk Management Senior Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

716.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672926

Amount of Each Receipt this Period

31.33

SUBTOTAL of Receipts This Page (optional)..... ►

93.99

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANN M SMITH

Mailing Address 16801 Carmichael Place

City State Zip Code
Purcellville VA 20132

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Administrative Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.36

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378595

Amount of Each Receipt this Period

15.58

Full Name (Last, First, Middle Initial)

B. ANN M SMITH

Mailing Address 16801 Carmichael Place

City State Zip Code
Purcellville VA 20132

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Administrative Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.94

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2411996

Amount of Each Receipt this Period

15.58

Full Name (Last, First, Middle Initial)

C. ANN M SMITH

Mailing Address 16801 Carmichael Place

City State Zip Code
Purcellville VA 20132

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Administrative Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.52

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672795

Amount of Each Receipt this Period

15.58

SUBTOTAL of Receipts This Page (optional)..... ►

46.74

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CHARLES M SMITH

Mailing Address 414 E. Burr Oak Dr.

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

803.14

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378793

Amount of Each Receipt this Period

38.59

Full Name (Last, First, Middle Initial)

B. CHARLES M SMITH

Mailing Address 414 E. Burr Oak Dr.

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

841.73

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412193

Amount of Each Receipt this Period

38.59

Full Name (Last, First, Middle Initial)

C. CHARLES M SMITH

Mailing Address 414 E. Burr Oak Dr.

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.32

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672989

Amount of Each Receipt this Period

38.59

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.77

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KATHERINE A SMITH

Mailing Address 231 KAINER AVENUE

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.79

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378716

Amount of Each Receipt this Period

19.06

Full Name (Last, First, Middle Initial)

B. KATHERINE A SMITH

Mailing Address 231 KAINER AVENUE

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.85

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412116

Amount of Each Receipt this Period

19.06

Full Name (Last, First, Middle Initial)

C. KATHERINE A SMITH

Mailing Address 231 KAINER AVENUE

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.91

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672912

Amount of Each Receipt this Period

19.06

SUBTOTAL of Receipts This Page (optional)..... ►

57.18

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KENNETH D SMITH

Mailing Address 619 N, HUMPHREY AVE.

City

OAK PARK

State

IL

Zip Code

60302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Architect & Constr-Sr

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

361.20

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378736

Amount of Each Receipt this Period

17.20

Full Name (Last, First, Middle Initial)

B. KENNETH D SMITH

Mailing Address 619 N, HUMPHREY AVE.

City

OAK PARK

State

IL

Zip Code

60302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Architect & Constr-Sr

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

378.40

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412136

Amount of Each Receipt this Period

17.20

Full Name (Last, First, Middle Initial)

C. KENNETH D SMITH

Mailing Address 619 N, HUMPHREY AVE.

City

OAK PARK

State

IL

Zip Code

60302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Architect & Constr-Sr

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

395.60

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672932

Amount of Each Receipt this Period

17.20

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. RICHARD J SMITH Jr.

Mailing Address 597 TREETOP LANE

City
GURNEE

State Zip Code
IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.07

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378800

Amount of Each Receipt this Period

24.25

Full Name (Last, First, Middle Initial)

B. RICHARD J SMITH Jr.

Mailing Address 597 TREETOP LANE

City
GURNEE

State Zip Code
IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.32

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412200

Amount of Each Receipt this Period

24.25

Full Name (Last, First, Middle Initial)

C. RICHARD J SMITH Jr.

Mailing Address 597 TREETOP LANE

City
GURNEE

State Zip Code
IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.57

Date of Receipt

M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672996

Amount of Each Receipt this Period

24.25

SUBTOTAL of Receipts This Page (optional)..... ►

72.75

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City
KILDEER

State Zip Code
IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
EVP-PRD-Product Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1971.58

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378785

Amount of Each Receipt this Period

94.62

Full Name (Last, First, Middle Initial)

B. STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City
KILDEER

State Zip Code
IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
EVP-PRD-Product Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2066.20

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412185

Amount of Each Receipt this Period

94.62

Full Name (Last, First, Middle Initial)

C. STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City
KILDEER

State Zip Code
IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
EVP-PRD-Product Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2160.82

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672981

Amount of Each Receipt this Period

94.62

SUBTOTAL of Receipts This Page (optional)..... ►

283.86

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KEVIN A SPATARO

Mailing Address 1663 SARATOGA LANE

City
GLENVIEW

State Zip Code
IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-FSS-Accounting Resear

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

834.34

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378755

Amount of Each Receipt this Period

40.02

Full Name (Last, First, Middle Initial)

B. KEVIN A SPATARO

Mailing Address 1663 SARATOGA LANE

City
GLENVIEW

State Zip Code
IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-FSS-Accounting Resear

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

874.36

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412155

Amount of Each Receipt this Period

40.02

Full Name (Last, First, Middle Initial)

C. KEVIN A SPATARO

Mailing Address 1663 SARATOGA LANE

City
GLENVIEW

State Zip Code
IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-FSS-Accounting Resear

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

914.38

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672951

Amount of Each Receipt this Period

40.02

SUBTOTAL of Receipts This Page (optional)..... ►

120.06

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BRIAN M SPENCE

Mailing Address 1001 N Vermont St

City State Zip Code
Arlington VA 22201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF Fld-Fin Analysis-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

635.02

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378771

Amount of Each Receipt this Period

30.61

Full Name (Last, First, Middle Initial)

B. BRIAN M SPENCE

Mailing Address 1001 N Vermont St

City State Zip Code
Arlington VA 22201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF Fld-Fin Analysis-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.63

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412171

Amount of Each Receipt this Period

30.61

Full Name (Last, First, Middle Initial)

C. BRIAN M SPENCE

Mailing Address 1001 N Vermont St

City State Zip Code
Arlington VA 22201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF Fld-Fin Analysis-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.24

Date of Receipt

M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672967

Amount of Each Receipt this Period

30.61

SUBTOTAL of Receipts This Page (optional)..... ►

91.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARY SPRINGBERG

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Product O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1228.96

Date of Receipt

M M / D D / Y Y Y Y Y
10 17 2014

Transaction ID : A2014-2378668

Amount of Each Receipt this Period

61.69

Full Name (Last, First, Middle Initial)

B. MARY SPRINGBERG

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Product O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1290.65

Date of Receipt

M M / D D / Y Y Y Y Y
10 31 2014

Transaction ID : A2014-2412068

Amount of Each Receipt this Period

61.69

Full Name (Last, First, Middle Initial)

C. MARY SPRINGBERG

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Product O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1352.34

Date of Receipt

M M / D D / Y Y Y Y Y
11 14 2014

Transaction ID : A2014-2672866

Amount of Each Receipt this Period

61.69

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.07

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GARY S STERE

Mailing Address 2015 SELVA MADERA COURT

City State Zip Code
ATLANTIC BEACH FL 32233

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

933.53

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378659

Amount of Each Receipt this Period

44.64

Full Name (Last, First, Middle Initial)

B. GARY S STERE

Mailing Address 2015 SELVA MADERA COURT

City State Zip Code
ATLANTIC BEACH FL 32233

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

978.17

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412059

Amount of Each Receipt this Period

44.64

Full Name (Last, First, Middle Initial)

C. GARY S STERE

Mailing Address 2015 SELVA MADERA COURT

City State Zip Code
ATLANTIC BEACH FL 32233

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1022.81

Date of Receipt

M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672856

Amount of Each Receipt this Period

44.64

SUBTOTAL of Receipts This Page (optional)..... ►

133.92

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MYRON E STOUFFER

Mailing Address 324 W. Cook

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Independent Chann

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.84

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378655

Amount of Each Receipt this Period

32.02

Full Name (Last, First, Middle Initial)

B. MYRON E STOUFFER

Mailing Address 324 W. Cook

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Independent Chann

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

698.86

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412055

Amount of Each Receipt this Period

32.02

Full Name (Last, First, Middle Initial)

C. MYRON E STOUFFER

Mailing Address 324 W. Cook

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Independent Chann

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.88

Date of Receipt

M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672852

Amount of Each Receipt this Period

32.02

SUBTOTAL of Receipts This Page (optional)..... ►

96.06

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DANIEL J SULLIVAN

Mailing Address 4018 BERRYWOOD DRIVE

City State Zip Code
SEAFORD NY 11783

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
FSL - Growth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.60

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378619

Amount of Each Receipt this Period

13.89

Full Name (Last, First, Middle Initial)

B. DANIEL J SULLIVAN

Mailing Address 4018 BERRYWOOD DRIVE

City State Zip Code
SEAFORD NY 11783

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
FSL - Growth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.49

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412020

Amount of Each Receipt this Period

13.89

Full Name (Last, First, Middle Initial)

C. DANIEL J SULLIVAN

Mailing Address 4018 BERRYWOOD DRIVE

City State Zip Code
SEAFORD NY 11783

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
FSL - Growth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.38

Date of Receipt

M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672819

Amount of Each Receipt this Period

13.89

SUBTOTAL of Receipts This Page (optional)..... ►

41.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KATHLEEN A SWAIN

Mailing Address 242 HIGHVIEW

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Internal Auditing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1347.22

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378681

Amount of Each Receipt this Period

64.49

Full Name (Last, First, Middle Initial)

B. KATHLEEN A SWAIN

Mailing Address 242 HIGHVIEW

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Internal Auditing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1411.71

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412081

Amount of Each Receipt this Period

64.49

Full Name (Last, First, Middle Initial)

C. KATHLEEN A SWAIN

Mailing Address 242 HIGHVIEW

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Internal Auditing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1476.20

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672878

Amount of Each Receipt this Period

64.49

SUBTOTAL of Receipts This Page (optional)..... ►

193.47

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 227 OF 282

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CARL J TACKETT

Mailing Address 307 WENDRON COURT

City	State	Zip Code
FRANKLIN	TN	37069

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2014

Transaction ID : A2014-2378688

Amount of Each Receipt this Period

20.61

Full Name (Last, First, Middle Initial)

B. CARL J TACKETT

Mailing Address 307 WENDRON COURT

City	State	Zip Code
FRANKLIN	TN	37069

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2014

Transaction ID : A2014-2412088

Amount of Each Receipt this Period

20.61

Full Name (Last, First, Middle Initial)

C. CARL J TACKETT

Mailing Address 307 WENDRON COURT

City	State	Zip Code
FRANKLIN	TN	37069

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.23

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2014

Transaction ID : A2014-2672885

Amount of Each Receipt this Period

20.61

SUBTOTAL of Receipts This Page (optional)..... ►

61.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SEAN D THAKUR

Mailing Address 701 N. Chruch St #1

City

Charlotte

State

NC

Zip Code

28202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

416.77

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378803

Amount of Each Receipt this Period

19.99

Full Name (Last, First, Middle Initial)

B. SEAN D THAKUR

Mailing Address 701 N. Chruch St #1

City

Charlotte

State

NC

Zip Code

28202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

436.76

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412202

Amount of Each Receipt this Period

19.99

Full Name (Last, First, Middle Initial)

C. SEAN D THAKUR

Mailing Address 701 N. Chruch St #1

City

Charlotte

State

NC

Zip Code

28202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

456.75

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672998

Amount of Each Receipt this Period

19.99

SUBTOTAL of Receipts This Page (optional)..... ►

59.97

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Joy A Thomas

Mailing Address 2240 Henley Street

City
Glenview

State
IL

Zip Code
60025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Product Operations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378854

Amount of Each Receipt this Period

14.65

Full Name (Last, First, Middle Initial)

B. Joy A Thomas

Mailing Address 2240 Henley Street

City
Glenview

State
IL

Zip Code
60025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Product Operations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.05

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412253

Amount of Each Receipt this Period

14.65

Full Name (Last, First, Middle Initial)

C. Joy A Thomas

Mailing Address 2240 Henley Street

City
Glenview

State
IL

Zip Code
60025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Product Operations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.70

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673047

Amount of Each Receipt this Period

14.65

SUBTOTAL of Receipts This Page (optional)..... ►

43.95

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL A THOMAS

Mailing Address 152 Robsart Place

City State Zip Code
KENILWORTH IL 60043

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-RE-Administration & Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.91

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378844

Amount of Each Receipt this Period

25.96

Full Name (Last, First, Middle Initial)

B. MICHAEL A THOMAS

Mailing Address 152 Robsart Place

City State Zip Code
KENILWORTH IL 60043

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-RE-Administration & Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

563.87

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412243

Amount of Each Receipt this Period

25.96

Full Name (Last, First, Middle Initial)

C. MICHAEL A THOMAS

Mailing Address 152 Robsart Place

City State Zip Code
KENILWORTH IL 60043

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-RE-Administration & Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

589.83

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673037

Amount of Each Receipt this Period

25.96

SUBTOTAL of Receipts This Page (optional)..... ►

77.88

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GERALYN A THOMPSON

Mailing Address 6906 S. BENNETT

City
CHICAGO

State Zip Code
IL 60649

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378703

Amount of Each Receipt this Period

34.11

Full Name (Last, First, Middle Initial)

B. GERALYN A THOMPSON

Mailing Address 6906 S. BENNETT

City
CHICAGO

State Zip Code
IL 60649

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

746.51

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412103

Amount of Each Receipt this Period

34.11

Full Name (Last, First, Middle Initial)

C. GERALYN A THOMPSON

Mailing Address 6906 S. BENNETT

City
CHICAGO

State Zip Code
IL 60649

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.62

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672899

Amount of Each Receipt this Period

34.11

SUBTOTAL of Receipts This Page (optional)..... ►

102.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM J THOMPSON

Mailing Address 5129 Pine River Trail

City State Zip Code
Castle Rock CO 80108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1087.54

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378652

Amount of Each Receipt this Period

52.09

Full Name (Last, First, Middle Initial)

B. WILLIAM J THOMPSON

Mailing Address 5129 Pine River Trail

City State Zip Code
Castle Rock CO 80108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1139.63

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412052

Amount of Each Receipt this Period

52.09

Full Name (Last, First, Middle Initial)

C. WILLIAM J THOMPSON

Mailing Address 5129 Pine River Trail

City State Zip Code
Castle Rock CO 80108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1191.72

Date of Receipt

M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672849

Amount of Each Receipt this Period

52.09

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

156.27

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MELINDA S TUNNER

Mailing Address 190 West Johnson Street

City State Zip Code
Palatine IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Sales Programs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1162.86

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378799

Amount of Each Receipt this Period

55.61

Full Name (Last, First, Middle Initial)

B. MELINDA S TUNNER

Mailing Address 190 West Johnson Street

City State Zip Code
Palatine IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Sales Programs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.47

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412199

Amount of Each Receipt this Period

55.61

Full Name (Last, First, Middle Initial)

C. MELINDA S TUNNER

Mailing Address 190 West Johnson Street

City State Zip Code
Palatine IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Sales Programs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1274.08

Date of Receipt

M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672995

Amount of Each Receipt this Period

55.61

SUBTOTAL of Receipts This Page (optional)..... ►

166.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 234 OF 282

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. RICHARD D TURANO

Mailing Address 4960 S CHESTER ST

City	State	Zip Code
ENGLEWOOD	CO	80111

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

Transaction ID : A2014-2378611

Amount of Each Receipt this Period

22.46

Full Name (Last, First, Middle Initial)

B. RICHARD D TURANO

Mailing Address 4960 S CHESTER ST

City	State	Zip Code
ENGLEWOOD	CO	80111

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Transaction ID : A2014-2412012

Amount of Each Receipt this Period

22.46

Full Name (Last, First, Middle Initial)

C. RICHARD D TURANO

Mailing Address 4960 S CHESTER ST

City	State	Zip Code
ENGLEWOOD	CO	80111

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		14		2014

Transaction ID : A2014-2672811

Amount of Each Receipt this Period

22.46

SUBTOTAL of Receipts This Page (optional)..... ►

67.38

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SHAUNDRA L TURNER

Mailing Address 7660 Stony Creek Lane

City	State	Zip Code
Ellicott City	MD	21043

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Regional Sr Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

Transaction ID : A2014-2378596

Amount of Each Receipt this Period

26.58

Full Name (Last, First, Middle Initial)

B. SHAUNDRA L TURNER

Mailing Address 7660 Stony Creek Lane

City	State	Zip Code
Ellicott City	MD	21043

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Regional Sr Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Transaction ID : A2014-2411997

Amount of Each Receipt this Period

26.58

Full Name (Last, First, Middle Initial)

C. SHAUNDRA L TURNER

Mailing Address 7660 Stony Creek Lane

City	State	Zip Code
Ellicott City	MD	21043

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Regional Sr Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		14		2014

Transaction ID : A2014-2672796

Amount of Each Receipt this Period

26.58

SUBTOTAL of Receipts This Page (optional)..... ►

79.74

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS P TUZAK

Mailing Address 443 HUNTINGTON LANE

City State Zip Code
 ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Sup & Proc Des-Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.10

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378717

Amount of Each Receipt this Period

12.37

Full Name (Last, First, Middle Initial)

B. THOMAS P TUZAK

Mailing Address 443 HUNTINGTON LANE

City State Zip Code
 ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Sup & Proc Des-Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.47

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412117

Amount of Each Receipt this Period

12.37

Full Name (Last, First, Middle Initial)

C. THOMAS P TUZAK

Mailing Address 443 HUNTINGTON LANE

City State Zip Code
 ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Sup & Proc Des-Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.84

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672913

Amount of Each Receipt this Period

12.37

SUBTOTAL of Receipts This Page (optional)..... ►

37.11

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY W URE

Mailing Address 609 S. KENNICOTT AVE

City State Zip Code
 ARLINGTON HTS IL 60005

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.43

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378721

Amount of Each Receipt this Period

10.44

Full Name (Last, First, Middle Initial)

B. JEFFREY W URE

Mailing Address 609 S. KENNICOTT AVE

City State Zip Code
 ARLINGTON HTS IL 60005

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.87

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412121

Amount of Each Receipt this Period

10.44

Full Name (Last, First, Middle Initial)

C. JEFFREY W URE

Mailing Address 609 S. KENNICOTT AVE

City State Zip Code
 ARLINGTON HTS IL 60005

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.31

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672917

Amount of Each Receipt this Period

10.44

SUBTOTAL of Receipts This Page (optional)..... ►

31.32

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM A VAINISI

Mailing Address 636 BALMORAL LANE

City
INVERNESS

State Zip Code
IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-LGL-Government & Indu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.21

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378712

Amount of Each Receipt this Period

64.93

Full Name (Last, First, Middle Initial)

B. WILLIAM A VAINISI

Mailing Address 636 BALMORAL LANE

City
INVERNESS

State Zip Code
IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-LGL-Government & Indu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1424.14

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412112

Amount of Each Receipt this Period

64.93

Full Name (Last, First, Middle Initial)

C. WILLIAM A VAINISI

Mailing Address 636 BALMORAL LANE

City
INVERNESS

State Zip Code
IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-LGL-Government & Indu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1489.07

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672908

Amount of Each Receipt this Period

64.93

SUBTOTAL of Receipts This Page (optional)..... ►

194.79

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LISA A VAN SCOYOC

Mailing Address 555 PRIMROSE LANE

City

CRYSTAL LAKE

State

IL

Zip Code

60014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Manager Accounting/Fi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.28

Date of Receipt

10 / 17 / 2014

Transaction ID : A2014-2378720

Amount of Each Receipt this Period

17.61

Full Name (Last, First, Middle Initial)

B. LISA A VAN SCOYOC

Mailing Address 555 PRIMROSE LANE

City

CRYSTAL LAKE

State

IL

Zip Code

60014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Manager Accounting/Fi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.89

Date of Receipt

10 / 31 / 2014

Transaction ID : A2014-2412120

Amount of Each Receipt this Period

17.61

Full Name (Last, First, Middle Initial)

C. LISA A VAN SCOYOC

Mailing Address 555 PRIMROSE LANE

City

CRYSTAL LAKE

State

IL

Zip Code

60014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Manager Accounting/Fi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.50

Date of Receipt

11 / 14 / 2014

Transaction ID : A2014-2672916

Amount of Each Receipt this Period

17.61

SUBTOTAL of Receipts This Page (optional)..... ►

52.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PATRICIA C VANLAMMEREN

Mailing Address 2800 Birchwood Avenue

City State Zip Code
Wilmette IL 60091

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Field Business Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1501.25

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378820

Amount of Each Receipt this Period

71.79

Full Name (Last, First, Middle Initial)

B. PATRICIA C VANLAMMEREN

Mailing Address 2800 Birchwood Avenue

City State Zip Code
Wilmette IL 60091

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Field Business Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1573.04

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412219

Amount of Each Receipt this Period

71.79

Full Name (Last, First, Middle Initial)

C. PATRICIA C VANLAMMEREN

Mailing Address 2800 Birchwood Avenue

City State Zip Code
Wilmette IL 60091

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Field Business Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1644.83

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673015

Amount of Each Receipt this Period

71.79

SUBTOTAL of Receipts This Page (optional)..... ►

215.37

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. RICHARD VAVRA

Mailing Address 2514 S WESLEY AVENUE

City
BERWYN

State Zip Code
IL 60402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

938.02

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378676

Amount of Each Receipt this Period

44.88

Full Name (Last, First, Middle Initial)

B. RICHARD VAVRA

Mailing Address 2514 S WESLEY AVENUE

City
BERWYN

State Zip Code
IL 60402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

982.90

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412076

Amount of Each Receipt this Period

44.88

Full Name (Last, First, Middle Initial)

C. STEVEN C VERNEY

Mailing Address 37144 FOX HILL DR

City
WADSWORTH

State Zip Code
IL 60083

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-FSS-Chief Risk Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3043.19

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378620

Amount of Each Receipt this Period

146.15

SUBTOTAL of Receipts This Page (optional)..... ►

235.91

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN C VERNEY

Mailing Address 37144 FOX HILL DR

City
WADSWORTH

State Zip Code
IL 60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
EVP-FSS-Chief Risk Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3189.34

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412021

Amount of Each Receipt this Period

146.15

Full Name (Last, First, Middle Initial)

B. STEVEN C VERNEY

Mailing Address 37144 FOX HILL DR

City
WADSWORTH

State Zip Code
IL 60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
EVP-FSS-Chief Risk Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3335.49

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672820

Amount of Each Receipt this Period

146.15

Full Name (Last, First, Middle Initial)

C. MICHAEL F VITALE, JR Jr.

Mailing Address 1824 Roy Lane

City
Forks Twp.

State Zip Code
PA 18040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.07

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378638

Amount of Each Receipt this Period

17.90

SUBTOTAL of Receipts This Page (optional)..... ►

310.20

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL F VITALE, JR Jr.

Mailing Address 1824 Roy Lane

City

Forks Twp.

State

PA

Zip Code

18040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

389.97

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412039

Amount of Each Receipt this Period

17.90

Full Name (Last, First, Middle Initial)

B. MICHAEL F VITALE, JR Jr.

Mailing Address 1824 Roy Lane

City

Forks Twp.

State

PA

Zip Code

18040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

407.87

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672837

Amount of Each Receipt this Period

17.90

Full Name (Last, First, Middle Initial)

C. EDWIN L WASINGER JR

Mailing Address 6245 MURIFIELD DRIVE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

APL-Strategic Operations-

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

436.24

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378759

Amount of Each Receipt this Period

20.84

SUBTOTAL of Receipts This Page (optional)..... ►

56.64

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. EDWIN L WASINGER JR

Mailing Address 6245 MURIFIELD DRIVE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

APL-Strategic Operations-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.08

Date of Receipt

M M / D D / Y Y Y Y Y
10 31 2014

Transaction ID : A2014-2412159

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

B. EDWIN L WASINGER JR

Mailing Address 6245 MURIFIELD DRIVE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

APL-Strategic Operations-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.92

Date of Receipt

M M / D D / Y Y Y Y Y
11 14 2014

Transaction ID : A2014-2672955

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

C. Robert Wasserman

Mailing Address 1N165 Partridge Dr

City State Zip Code
Wheaton IL 60188

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-eBusiness & Direc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1510.69

Date of Receipt

M M / D D / Y Y Y Y Y
10 17 2014

Transaction ID : A2014-2378856

Amount of Each Receipt this Period

72.39

SUBTOTAL of Receipts This Page (optional)..... ►

114.07

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Robert Wasserman

Mailing Address 1N165 Partridge Dr

City
Wheaton

State
IL

Zip Code
60188

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-eBusiness & Direc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1583.08

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412255

Amount of Each Receipt this Period

72.39

Full Name (Last, First, Middle Initial)

B. Robert Wasserman

Mailing Address 1N165 Partridge Dr

City
Wheaton

State
IL

Zip Code
60188

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-eBusiness & Direc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1655.47

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673049

Amount of Each Receipt this Period

72.39

Full Name (Last, First, Middle Initial)

C. LEWIS C WEBB II

Mailing Address 1444 El Pardo Dr

City
Trinity

State
FL

Zip Code
34655

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.92

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378839

Amount of Each Receipt this Period

18.06

SUBTOTAL of Receipts This Page (optional)..... ►

162.84

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LEWIS C WEBB II

Mailing Address 1444 El Pardo Dr

City State Zip Code
Trinity FL 34655

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.98

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412238

Amount of Each Receipt this Period

18.06

Full Name (Last, First, Middle Initial)

B. LEWIS C WEBB II

Mailing Address 1444 El Pardo Dr

City State Zip Code
Trinity FL 34655

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.04

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673032

Amount of Each Receipt this Period

18.06

Full Name (Last, First, Middle Initial)

C. BRET D WEHRLY

Mailing Address 2079 POWHATAN TRAIL

City State Zip Code
RICHMOND KY 40475

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.33

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378819

Amount of Each Receipt this Period

13.73

SUBTOTAL of Receipts This Page (optional)..... ►

49.85

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BRET D WEHRLY

Mailing Address 2079 POWHATAN TRAIL

City State Zip Code
 RICHMOND KY 40475

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.06

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412218

Amount of Each Receipt this Period

13.73

Full Name (Last, First, Middle Initial)

B. BRET D WEHRLY

Mailing Address 2079 POWHATAN TRAIL

City State Zip Code
 RICHMOND KY 40475

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.79

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2673014

Amount of Each Receipt this Period

13.73

Full Name (Last, First, Middle Initial)

C. JEROME WHITE

Mailing Address 5081 OVERLOOK DR.

City State Zip Code
 ROSWELL GA 30075

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.01

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378627

Amount of Each Receipt this Period

12.27

SUBTOTAL of Receipts This Page (optional)..... ►

39.73

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEROME WHITE

Mailing Address 5081 OVERLOOK DR.

City State Zip Code
 ROSWELL GA 30075

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.28

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412028

Amount of Each Receipt this Period

12.27

Full Name (Last, First, Middle Initial)

B. JEROME WHITE

Mailing Address 5081 OVERLOOK DR.

City State Zip Code
 ROSWELL GA 30075

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.55

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2672826

Amount of Each Receipt this Period

12.27

Full Name (Last, First, Middle Initial)

C. SAMUEL W WHITEMAN

Mailing Address 47 Park View Ln

City State Zip Code
 Hawthorn Woods IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-HO Leadership-Dire

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.04

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378806

Amount of Each Receipt this Period

37.34

SUBTOTAL of Receipts This Page (optional)..... ►

61.88

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SAMUEL W WHITEMAN

Mailing Address 47 Park View Ln

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-HO Leadership-Dire

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

817.38

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412205

Amount of Each Receipt this Period

37.34

Full Name (Last, First, Middle Initial)

B. SAMUEL W WHITEMAN

Mailing Address 47 Park View Ln

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-HO Leadership-Dire

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.72

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673001

Amount of Each Receipt this Period

37.34

Full Name (Last, First, Middle Initial)

C. CYNTHIA A WHITFIELD

Mailing Address 298 Keswick Grove Lane

City

Franklin

State

TN

Zip Code

37067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.39

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378623

Amount of Each Receipt this Period

25.56

SUBTOTAL of Receipts This Page (optional)..... ►

100.24

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CYNTHIA A WHITFIELD

Mailing Address 298 Keswick Grove Lane

City State Zip Code
Franklin TN 37067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.95

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412024

Amount of Each Receipt this Period

25.56

Full Name (Last, First, Middle Initial)

B. CYNTHIA A WHITFIELD

Mailing Address 298 Keswick Grove Lane

City State Zip Code
Franklin TN 37067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

584.51

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672823

Amount of Each Receipt this Period

25.56

Full Name (Last, First, Middle Initial)

C. GENE T WHOLF

Mailing Address 18613 Kappa Road

City State Zip Code
Lexington IL 61753

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Mgmt Adjusting CSL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.70

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378826

Amount of Each Receipt this Period

12.70

SUBTOTAL of Receipts This Page (optional)..... ►

63.82

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GENE T WHOLF

Mailing Address 18613 Kappa Road

City
Lexington

State Zip Code
IL 61753

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims-Mgmt Adjusting CSL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412225

Amount of Each Receipt this Period

12.70

Full Name (Last, First, Middle Initial)

B. GENE T WHOLF

Mailing Address 18613 Kappa Road

City
Lexington

State Zip Code
IL 61753

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims-Mgmt Adjusting CSL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.10

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673020

Amount of Each Receipt this Period

12.70

Full Name (Last, First, Middle Initial)

C. JOHN K WILCOX

Mailing Address 1120 JESSICA LANE

City
LIBERTYVILLE

State Zip Code
IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PF-Insurance Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.28

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378690

Amount of Each Receipt this Period

46.35

SUBTOTAL of Receipts This Page (optional)..... ►

71.75

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN K WILCOX

Mailing Address 1120 JESSICA LANE

City
LIBERTYVILLE

State Zip Code
IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PF-Insurance Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1013.63

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412090

Amount of Each Receipt this Period

46.35

Full Name (Last, First, Middle Initial)

B. JOHN K WILCOX

Mailing Address 1120 JESSICA LANE

City
LIBERTYVILLE

State Zip Code
IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PF-Insurance Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1059.98

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672887

Amount of Each Receipt this Period

46.35

Full Name (Last, First, Middle Initial)

C. JAMES L WILLCOX

Mailing Address 1562 Sienna Oak Court

City
Sandy

State Zip Code
UT 84092

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.87

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378654

Amount of Each Receipt this Period

28.89

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

121.59

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 253 OF 282

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES L WILLCOX

Mailing Address 1562 Sienna Oak Court

City	State	Zip Code
Sandy	UT	84092

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2014

Transaction ID : A2014-2412054

Amount of Each Receipt this Period

28.89

Full Name (Last, First, Middle Initial)

B. JAMES L WILLCOX

Mailing Address 1562 Sienna Oak Court

City	State	Zip Code
Sandy	UT	84092

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

659.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2014

Transaction ID : A2014-2672851

Amount of Each Receipt this Period

28.89

Full Name (Last, First, Middle Initial)

C. JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City	State	Zip Code
CLARKSVILLE	MD	21029

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

956.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2014

Transaction ID : A2014-2378704

Amount of Each Receipt this Period

45.75

SUBTOTAL of Receipts This Page (optional)..... ►

103.53

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City State Zip Code
 CLARKSVILLE MD 21029

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1002.45

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412104

Amount of Each Receipt this Period

45.75

Full Name (Last, First, Middle Initial)

B. JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City State Zip Code
 CLARKSVILLE MD 21029

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1048.20

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2672900

Amount of Each Receipt this Period

45.75

Full Name (Last, First, Middle Initial)

C. KURT L WINTER

Mailing Address 1403 N. WALNUT

City State Zip Code
 ARLINGTON HGHTS IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-MRK-Regional Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.86

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378840

Amount of Each Receipt this Period

22.56

SUBTOTAL of Receipts This Page (optional)..... ►

114.06

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KURT L WINTER

Mailing Address 1403 N. WALNUT

City State Zip Code
ARLINGTON HGHTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-MRK-Regional Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.42

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412239

Amount of Each Receipt this Period

22.56

Full Name (Last, First, Middle Initial)

B. KURT L WINTER

Mailing Address 1403 N. WALNUT

City State Zip Code
ARLINGTON HGHTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-MRK-Regional Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.98

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2673033

Amount of Each Receipt this Period

22.56

Full Name (Last, First, Middle Initial)

C. Matthew E Winter

Mailing Address 70 Ferncliff Drive

City State Zip Code
West Hartford CT 06117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-APL-Pres. Allstate Pe

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3710.74

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378860

Amount of Each Receipt this Period

177.69

SUBTOTAL of Receipts This Page (optional)..... ►

222.81

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Matthew E Winter

Mailing Address 70 Ferncliff Drive

City State Zip Code
 West Hartford CT 06117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-APL-Pres. Allstate Pe

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3888.43

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412259

Amount of Each Receipt this Period

177.69

Full Name (Last, First, Middle Initial)

B. Matthew E Winter

Mailing Address 70 Ferncliff Drive

City State Zip Code
 West Hartford CT 06117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-APL-Pres. Allstate Pe

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4066.12

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2673053

Amount of Each Receipt this Period

177.69

Full Name (Last, First, Middle Initial)

C. RONALD W WINTER

Mailing Address 2908 GREY HERON CT.

City State Zip Code
 JOHNSBURG IL 60051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.24

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378754

Amount of Each Receipt this Period

21.43

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

376.81

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. RONALD W WINTER

Mailing Address 2908 GREY HERON CT.

City

JOHNSBURG

State

IL

Zip Code

60051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.67

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412154

Amount of Each Receipt this Period

21.43

Full Name (Last, First, Middle Initial)

B. RONALD W WINTER

Mailing Address 2908 GREY HERON CT.

City

JOHNSBURG

State

IL

Zip Code

60051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.10

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672950

Amount of Each Receipt this Period

21.43

Full Name (Last, First, Middle Initial)

C. BRUCE A WOIKE

Mailing Address 1318 N. CHESTNUT AVE.

City

ARLINGTON HTS.

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.93

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378751

Amount of Each Receipt this Period

22.95

SUBTOTAL of Receipts This Page (optional)..... ►

65.81

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BRUCE A WOIKE

Mailing Address 1318 N. CHESTNUT AVE.

City State Zip Code
 ARLINGTON HTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.88

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412151

Amount of Each Receipt this Period

22.95

Full Name (Last, First, Middle Initial)

B. BRUCE A WOIKE

Mailing Address 1318 N. CHESTNUT AVE.

City State Zip Code
 ARLINGTON HTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.83

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2672947

Amount of Each Receipt this Period

22.95

Full Name (Last, First, Middle Initial)

C. ANGELA K WOIROL

Mailing Address 28616 Sky Crest Dr

City State Zip Code
 Ivanhoe IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Prod Ops State Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

882.50

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : A2014-2378807

Amount of Each Receipt this Period

42.92

SUBTOTAL of Receipts This Page (optional)..... ►

88.82

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANGELA K WOIROL

Mailing Address 28616 Sky Crest Dr

City	State	Zip Code
Ivanhoe	IL	60060

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Prod Ops State Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2014

Transaction ID : A2014-2412206

Amount of Each Receipt this Period

42.92

Full Name (Last, First, Middle Initial)

B. ANGELA K WOIROL

Mailing Address 28616 Sky Crest Dr

City	State	Zip Code
Ivanhoe	IL	60060

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Prod Ops State Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

968.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2014

Transaction ID : A2014-2673002

Amount of Each Receipt this Period

42.92

Full Name (Last, First, Middle Initial)

C. MATTHEW WOJTASZEK

Mailing Address 7 WELLESLEY COURT

City	State	Zip Code
HAWTHORN WOODS	IL	60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Department Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.89

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2014

Transaction ID : A2014-2378622

Amount of Each Receipt this Period

17.65

SUBTOTAL of Receipts This Page (optional)..... ►

103.49

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MATTHEW WOJTASZEK

Mailing Address 7 WELLESLEY COURT

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Department Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.54

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412023

Amount of Each Receipt this Period

17.65

Full Name (Last, First, Middle Initial)

B. MATTHEW WOJTASZEK

Mailing Address 7 WELLESLEY COURT

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Department Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.19

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672822

Amount of Each Receipt this Period

17.65

Full Name (Last, First, Middle Initial)

C. DAVID E WOOLWINE

Mailing Address 1608 W. ROSEHILL DR

City State Zip Code
CHICAGO IL 60660

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.88

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378646

Amount of Each Receipt this Period

21.17

SUBTOTAL of Receipts This Page (optional)..... ►

56.47

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DAVID E WOOLWINE

Mailing Address 1608 W. ROSEHILL DR

City
CHICAGO

State Zip Code
IL 60660

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.05

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412047

Amount of Each Receipt this Period

21.17

Full Name (Last, First, Middle Initial)

B. DAVID E WOOLWINE

Mailing Address 1608 W. ROSEHILL DR

City
CHICAGO

State Zip Code
IL 60660

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.22

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672845

Amount of Each Receipt this Period

21.17

Full Name (Last, First, Middle Initial)

C. FLOYD M YAGER

Mailing Address 1610 BIRCH LANE

City
PARK RIDGE

State Zip Code
IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Chief Data Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1344.48

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378729

Amount of Each Receipt this Period

64.49

SUBTOTAL of Receipts This Page (optional)..... ►

106.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. FLOYD M YAGER

Mailing Address 1610 BIRCH LANE

City State Zip Code
 PARK RIDGE IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Chief Data Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1408.97

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A2014-2412129

Amount of Each Receipt this Period

64.49

Full Name (Last, First, Middle Initial)

B. FLOYD M YAGER

Mailing Address 1610 BIRCH LANE

City State Zip Code
 PARK RIDGE IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Chief Data Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1473.46

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : A2014-2672925

Amount of Each Receipt this Period

64.49

Full Name (Last, First, Middle Initial)

C. NOEL C YOUNG

Mailing Address 10936 E. Butherus Drive

City State Zip Code
 Scottsdale AZ 85255

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

621.05

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A2014-2378797

Amount of Each Receipt this Period

34.60

SUBTOTAL of Receipts This Page (optional)..... ►

163.58

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. NOEL C YOUNG

Mailing Address 10936 E. Butherus Drive

City State Zip Code
Scottsdale AZ 85255

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.65

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412197

Amount of Each Receipt this Period

34.60

Full Name (Last, First, Middle Initial)

B. NOEL C YOUNG

Mailing Address 10936 E. Butherus Drive

City State Zip Code
Scottsdale AZ 85255

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.25

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672993

Amount of Each Receipt this Period

34.60

Full Name (Last, First, Middle Initial)

C. PHILLIP C YOUNG

Mailing Address 2181 APPLE HILL LANE

City State Zip Code
BUFFALO GROVE IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Aviation Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.04

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378706

Amount of Each Receipt this Period

22.12

SUBTOTAL of Receipts This Page (optional)..... ►

91.32

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PHILLIP C YOUNG

Mailing Address 2181 APPLE HILL LANE

City

BUFFALO GROVE

State

IL

Zip Code

60089

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Aviation Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.16

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412106

Amount of Each Receipt this Period

22.12

Full Name (Last, First, Middle Initial)

B. PHILLIP C YOUNG

Mailing Address 2181 APPLE HILL LANE

City

BUFFALO GROVE

State

IL

Zip Code

60089

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Aviation Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.28

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672902

Amount of Each Receipt this Period

22.12

Full Name (Last, First, Middle Initial)

C. MARY E ZAGORSKI

Mailing Address 2609 N PINE AVE

City

ARLINGTON HEIGHTS

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PMO Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

922.75

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378727

Amount of Each Receipt this Period

44.26

SUBTOTAL of Receipts This Page (optional)..... ►

88.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARY E ZAGORSKI

Mailing Address 2609 N PINE AVE

City State Zip Code
ARLINGTON HEIGHTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PMO Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.01

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412127

Amount of Each Receipt this Period

44.26

Full Name (Last, First, Middle Initial)

B. MARY E ZAGORSKI

Mailing Address 2609 N PINE AVE

City State Zip Code
ARLINGTON HEIGHTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PMO Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1011.27

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672923

Amount of Each Receipt this Period

44.26

Full Name (Last, First, Middle Initial)

C. PAUL K ZIGTERMAN

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City State Zip Code
VILLA PARK IL 60181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.15

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378767

Amount of Each Receipt this Period

21.45

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

109.97

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PAUL K ZIGTERMAN

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City State Zip Code
VILLA PARK IL 60181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.60

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412167

Amount of Each Receipt this Period

21.45

Full Name (Last, First, Middle Initial)

B. PAUL K ZIGTERMAN

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City State Zip Code
VILLA PARK IL 60181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.05

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672963

Amount of Each Receipt this Period

21.45

Full Name (Last, First, Middle Initial)

C. GERALD L ZIMMERMAN JR

Mailing Address 2584 Sutton Lane

City State Zip Code
AURORA IL 60502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1590.35

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378789

Amount of Each Receipt this Period

76.05

SUBTOTAL of Receipts This Page (optional)..... ►

118.95

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 267 OF 282

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GERALD L ZIMMERMAN JR

Mailing Address 2584 Sutton Lane

City
AURORA

State Zip Code
IL 60502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2014-2412189

Amount of Each Receipt this Period

76.05

Full Name (Last, First, Middle Initial)

B. GERALD L ZIMMERMAN JR

Mailing Address 2584 Sutton Lane

City
AURORA

State Zip Code
IL 60502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1742.45

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : A2014-2672985

Amount of Each Receipt this Period

76.05

Full Name (Last, First, Middle Initial)

C. CARLA A ZUNIGA

Mailing Address 2189 N. BEAVER CREEK DRIVE

City
VERNON HILLS

State Zip Code
IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1025.70

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : A2014-2378823

Amount of Each Receipt this Period

49.25

SUBTOTAL of Receipts This Page (optional)..... ►

201.35

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 268 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CARLA A ZUNIGA

Mailing Address 2189 N. BEAVER CREEK DRIVE

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1074.95

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : A2014-2412222

Amount of Each Receipt this Period

49.25

Full Name (Last, First, Middle Initial)

B. CARLA A ZUNIGA

Mailing Address 2189 N. BEAVER CREEK DRIVE

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1124.20

Date of Receipt

M M / D D / Y Y Y Y Y
 11 14 2014

Transaction ID : A2014-2673017

Amount of Each Receipt this Period

49.25

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

98.50

TOTAL This Period (last page this line number only)..... ►

28220.03

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 269 OF 282

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Fifth Third Bank

Mailing Address 346 West Carol Lane

City Elmhurst	State IL	Zip Code 60062
------------------	-------------	-------------------

Purpose of Disbursement
Service Charge

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		13		2014

Transaction ID : B539680

Amount of Each Disbursement this Period

113.58

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.58

113.58

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 270 OF 282

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Reaching For A Brighter America PAC (RBA PAC)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

Mailing Address P.O. Box 15709

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Not Applicable

Transaction ID : B537763

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. National Republican Senatorial Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

Mailing Address Ronald Reagan Republican Ctr. 425

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Not Applicable

Transaction ID : B537764

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7000.00

7000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 271 OF 282

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Althoff

Mailing Address PO Box 2275

City	State	Zip Code
Crystal Lake	IL	60039

Purpose of Disbursement
P-2016 State Senate 32 IL

Candidate Name

Pamela AlthoffOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 32

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2014

Transaction ID : B446150

Amount of Each Disbursement this Period

-700.00

Voided: Original check dated 01/07/13

Full Name (Last, First, Middle Initial)

B. Friends of Monique Davis

Mailing Address PO Box 43637

City	State	Zip Code
Chicago	IL	60643

Purpose of Disbursement
P-2014 State House 27 IL

Candidate Name

Monique DavisOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 27

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2014

Transaction ID : B446162

Amount of Each Disbursement this Period

-500.00

Voided: Original check dated 01/07/13

Full Name (Last, First, Middle Initial)

C. Citizens for Linda Holmes

Mailing Address PO Box 7982

City	State	Zip Code
Aurora	IL	60507

Purpose of Disbursement
P-2014 State Senate 42 IL

Candidate Name

Linda HolmesOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 42

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2014

Transaction ID : B446155

Amount of Each Disbursement this Period

-750.00

Voided: Original check dated 01/07/13

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-1950.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Althoff

Mailing Address P.O. Box 2275

City	State	Zip Code
Crystal Lake	IL	60039

Purpose of Disbursement
P-2016 State Senate 32 IL

011

Candidate Name

Pamela AlthoffCategory/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 32

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		07		2014

Transaction ID : B539132

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Anthony DeLuca

Mailing Address 852 Mackler Drive

City	State	Zip Code
Chicago Heights	IL	60411

Purpose of Disbursement
G-2014 State House 80 IL

011

Candidate Name

Anthony DeLucaCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 80

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		07		2014

Transaction ID : B539145

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends of Don Harmon

Mailing Address 1243 Woodbine Suite 102

City	State	Zip Code
Oak Park	IL	60302

Purpose of Disbursement
G-2014 State Senate 39 IL

011

Candidate Name

Don HarmonCategory/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 39

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		07		2014

Transaction ID : B539135

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 274 OF 282

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Matt Murphy

Mailing Address 952 North Arrowhead Drive

City Palatine	State IL	Zip Code 90074
------------------	-------------	-------------------

Purpose of Disbursement
G-2014 State Senate 27 IL

011

Category/
Type

Candidate Name

Matt MurphyOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 27

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		07		2014

Transaction ID : B539141

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Friends of Kwame Raoul

Mailing Address 855 E. Drexel Square

City Chicago	State IL	Zip Code 60615
-----------------	-------------	-------------------

Purpose of Disbursement
P-2016 State Senate 13 IL

011

Category/
Type

Candidate Name

Kwame RaoulOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		07		2014

Transaction ID : B539143

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends of Bob Rita

Mailing Address 2030 High Street

City Blue Island	State IL	Zip Code 60406
---------------------	-------------	-------------------

Purpose of Disbursement
G-2014 State House 28 IL

011

Category/
Type

Candidate Name

Bob RitaOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 28

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		07		2014

Transaction ID : B539142

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 276 OF 282

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Syverson for Senate

Mailing Address 200 South Wyman Street Suite 302

City	State	Zip Code
Rockford	IL	61101

Purpose of Disbursement
P-2016 State Senate 35 IL

011

Candidate Name

Dave SyversonCategory/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 35

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		07		2014

Transaction ID : B539140

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

B. Friends of Ann Williams

Mailing Address 4044 N. Lincoln Avenue #266

City	State	Zip Code
Chicago	IL	60618

Purpose of Disbursement
G-2014 State House 11 IL

011

Candidate Name

Ann M WilliamsCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		07		2014

Transaction ID : B539134

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Dan Forestal for State Representative

Mailing Address 1101 N Layman Ave

City	State	Zip Code
Indianapolis	IN	46219

Purpose of Disbursement
G-2014 State House 100 IN

011

Candidate Name

Dan P ForestalCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Transaction ID : B537765

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1750.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 277 OF 282

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Matt Lehman for State Representative

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		14		2014

Mailing Address 663 Lehman

City	State	Zip Code
Berne	IN	46711

Purpose of Disbursement
G-2014 State House 79 IN

011

Transaction ID : B539409

Amount of Each Disbursement this Period

1000.00

Candidate Name

Matt LehmanCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 79

Full Name (Last, First, Middle Initial)

B. The Mayfield Campaign

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		14		2014

Mailing Address 50 S. Madison

City	State	Zip Code
Mooreville	IN	46158

Purpose of Disbursement
G-2014 State House 60 IN

011

Transaction ID : B539410

Amount of Each Disbursement this Period

500.00

Candidate Name

Peggy MayfieldCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 60

Full Name (Last, First, Middle Initial)

C. Friends of Dereck Davis

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Mailing Address 17 W. Courtland Suite 210

City	State	Zip Code
Bel Air	MD	21014

Purpose of Disbursement
O-2014 State House 25 MD

011

Transaction ID : B538480

Amount of Each Disbursement this Period

500.00

Candidate Name

Dereck E DavisCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼

State: MD District: 25

Election Cycle

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 278 OF 282

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Friends of Sally Jameson

Mailing Address Post Office Box 333

City
BryantownState
MDZip Code
20617Purpose of Disbursement
O-2014 State House 28 MD

011

Candidate Name

Sally Young JamesonCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Election Cycle

State: MD District: 28

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : B538461

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

B. Citizens for Delores Kelley

Mailing Address 17 W. Courtland Street Suite 210

City
Bel AirState
MDZip Code
21014Purpose of Disbursement
O-2014 State Senate 10 MD

011

Candidate Name

Delores G KelleyCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Election Cycle

State: MD District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : B538492

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

C. Friends of Kathy Klausmeier

Mailing Address 1105 Regester Avenue

City
BaltimoreState
MDZip Code
21239Purpose of Disbursement
O-2014 State Senate 08 MD

011

Candidate Name

Katherine Ann KlausmeierCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Election Cycle

State: MD District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : B538425

Amount of Each Disbursement this Period

150.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

450.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Supporters of Thomas Mac Middleton

Mailing Address PO Box 2502

City	State	Zip Code
LaPlata	MD	20646

Purpose of Disbursement
O-2014 State Senate 28 MD

011

Candidate Name

Thomas (Mac) MiddletonCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Election Cycle

State: MD District: 28

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : B538454

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. The Citizens for David Rudolph Committee

Mailing Address P.O. Box 343

City	State	Zip Code
Rising Sun	MD	21014

Purpose of Disbursement
O-2014 State House 34B MD

011

Candidate Name

David D. RudolphCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Election Cycle

State: MD District: 34

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : B538439

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Friends of Kelly Schulz

Mailing Address 6773 Balmoral Ridge

City	State	Zip Code
New Market	MD	21774

Purpose of Disbursement
O-2014 State House 4A MD

011

Candidate Name

Kelly M SchulzCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Election Cycle

State: MD District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : B538485

Amount of Each Disbursement this Period

150.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

900.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Friends of Michael Vaughn

Mailing Address P.O. Box 6144

City	State	Zip Code
Capitol Heights	MD	20791

Purpose of Disbursement
O-2014 State House 24 MD

Candidate Name

Michael L VaughnOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: MD District: 24

Election Cycle

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : B538466

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

B. Representative David "Doc" Moore

Mailing Address 3919 Paxson Street

City	State	Zip Code
Missoula	MT	59801

Purpose of Disbursement
G-2014 State House 92 MT

Candidate Name

David "Doc" MooreOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: MT District: 92

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		07		2014

Transaction ID : B511297

Amount of Each Disbursement this Period

-170.00

Voided: Original check dated 09/05/14

Full Name (Last, First, Middle Initial)

C. Committee to Elect Robert Hackett for State Representative

Mailing Address 2050 Palouse Drive

City	State	Zip Code
London	OH	43140

Purpose of Disbursement
G-2014 State House 74 OH

Candidate Name

Bob HackettOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 74

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Transaction ID : B537766

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

480.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Kevin Bacon

Mailing Address 26 North Cassady Ave.

City Columbus	State OH	Zip Code 43209
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Purpose of Disbursement
G-2014 State Senate 3 OH

011

Candidate Name

Kevin BaconOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		14		2014

Transaction ID : B539405

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Elect DeVitis

Mailing Address 660 Singley Avenue

City Akron	State OH	Zip Code 44310
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Purpose of Disbursement
G-2014 State House 36 OH

011

Candidate Name

Anthony DeVitisOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 36

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		14		2014

Transaction ID : B539406

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Citizens for Hottinger

Mailing Address 894 Johnathan Lane

City Newark	State OH	Zip Code 43055
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Purpose of Disbursement
G-2014 State House 71 OH

011

Candidate Name

Jay HottingerOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 71

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		14		2014

Transaction ID : B539407

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 282 OF 282

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Stephanie Kunze

Mailing Address 865 Macon Alley

City Columbus	State OH	Zip Code 43206
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Purpose of Disbursement
G-2014 State House 24 OH

Candidate Name

Stephanie KunzeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2014

Transaction ID : B539408

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

500.00

12630.00
